

STAFFORDSHIRE COUNTY COUNCIL

The 60th ANNUAL REPORT

OF THE

County Principal
School Medical Officer

For the year 1967





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ANNUAL REPORT OF THE COUNTY PRINCIPAL SCHOOL MEDICAL OFFICER FOR 1967

The year covered by this report is the first in which the statistics are entirely related to the new area and population of the County of Stafford since the boundary change in April 1966. So it is as yet not possible to draw comparisons with the work of previous years in terms of numbers. There are, however, a number of general points on which comment may be useful.

Staff shortages in the dental and medical and speech therapy and child guidance fields continue to limit the extent of the respective services. The effect on the dental service has been commented on for a number of years now and need not be repeated. It does stress the importance of prevention and this is reinforced, if that were needed, by the results of the special survey into the state of the teeth of school entrants on page 52. These depressing findings cannot all be remedied by treatment—the best that can be done is to fill those cavities where it is possible. The need goes deeper and it is sad to reflect that at least half of the decayed teeth could have been prevented by fluoridation of water supplies. Sound milk teeth lead to a better-formed mouth of permanent teeth and the quality of the latter resembles the former.

Much effort was spent by both the Dental Section and the Health Education Section on dental health in the schools. The sections were much helped by the co-operation of the teachers. We are very grateful to them for their efforts.

The reports on the activities of the special schools show that they have been considerably improved and set out the admirable work performed. This is the result of careful planning in the past, but the provision is now lagging in places behind demand. Table 48 shows that in 1967, 186 handicapped pupils were admitted to places in special schools, but there was virtually no change in the numbers on the waiting list at the end of the year.

The opening of a pre-school nursery unit for the partially hearing to which young children can be admitted represents another advance. This preliminary guidance will help them to gain the maximum benefit from their later admission to a school for the partially hearing such as Needwood.

The number of cases of catarrhal otitis media shows a large increase during the year (table 20) in spite of the smaller school population covered by this report. The reason for this is not known and the same observation has been made in other parts of the country and warrants investigation.

The report of the County Health Education Officer shows that this section has now a well established relationship with school staffs and is making a very useful contribution towards an understanding of health matters by pupils. This is of paramount importance for the understanding of the purpose for actions to improve health is more likely to secure acceptance by pupils than if instructions only are repeated.

The year under review has not been easy because of staffing difficulties but those in post have worked conscientiously and well. The continued help and good will from allied departments of the County and encouragement of the Committee have been greatly appreciated and eased the wheels very much.

G. RAMAGE,
County Principal School Medical Officer.

School Health Service, 1 Mount Street, Stafford.

SCHOOL HEALTH SERVICE STAFF, 1967

County Principal School Medical Officer

G. RAMAGE, M.A. (Admin.), M.D., Ch.B. B.Sc., M.R.C.S., L.R.C.P., D.P.H.

Deputy Principal County School Medical Officer

A. WITHNELL, B.Sc., M.D., Ch.B., D.P.H.

Senior Administrative Medical Officer for Schools

A. BLENCH, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

Senior Medical Officer

H. E. WILSON, M.B., Ch.B., D.O., D.P.H. (M.O.H. Leek U.D. and R.D.)

Whole-Time Medical Officers

- G. KATHLEEN BIRCHENOUGH, M.R.C.S., L.R.C.P., D.P.H. (Senior Clinical Medical Officer) (Retired 20/7/67)
- AGNES W. E. BLACK, M.B., B.Ch., B.A.O., D.P.H. (Senior Clinical Medical Officer)
- PEARL I. BLENCH, L.R.C.P., L.R.C.S., L.R.F.P.S.
- M. L. Burr, M.B., B.S., D.Obst., R.C.O.G., D.P.H.
- NORAH M. CLARKE, M.B., Ch.B.
- C. M. David, M.B., Ch.B. (Appointed 6/3/67) (D.P.H. Course from 9/10/67)
- Bessie W. Goodwill, M.B., Ch.B., M.R.C.S., L.R.C.P. (Senior Clinical Medical Officer)
- MARY M. MARKHAM, M.B., Ch.B., D.T.M. & H., D.P.H.
- HAZEL R. MEACOCK, M.B., Ch.B., D.C.H., D.P.H. (Senior Clinical Medical Officer)
- J. A. Scully, M.A., M.B., Ch.B., B.A.O., D.P.H. (Transferred to Newcastle E.D. 21/1/67)
- R. WHARTON, M.B., Ch.B. (Senior Clinical Medical Officer)
- HENRIETTA M. WILSON, B.A., M.B., B.Chir. (Transferred from Dudley C.B. and re-appointed 3/7/67) (Senior Clinical Medical Officer)

^{*} Attending D.P.H. Course.

Medical Officers holding Joint Appointments

C. R. B. BAMFORD, M.B., B.S., D.P.H. (M.O.H. Stone U.D. and R.D.)

SHEILA M. DURKIN, M.B., B.Ch., D.P.H. (Area Medical Officer and M.O.H. Tutbury R.D. and Uttoxeter U.D. and R.D.)

- A. R. KENNEDY, M.B., Ch.B., B.Sc., M.R.C.S., L.R.C.P., D.P.H. (M.O.H. Seisdon R.D.) (Died 8/3/67)
- A. G. THOMSON, M.B., Ch.B., D.P.H. (M.O.H. Cannock R.D. and Stafford R.D.)
- J. TOLLAND, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. (Area Medical Officer Kidsgrove U.D. and Newcastle R.D.)
- E. H. Tomlin, M.D., Ch.B., D.P.H. (Area Medical Officer and M.O.H. Cheadle R.D.)

Part-Time Medical Officers

M. ALLAN, M.B., Ch.B., D.P.H. (Appointed 12/9/67)

MARGARET BAMBER, M.B., B.Ch., B.A.O., D.P.H.

PATRICIA E. BASS, L.R.C.P., L.R.C.S., D.Obst., R.C.O.G.

A. H. CHESHIRE, M.B., B.S., M.R.C.S., L.R.C.P.

ROSAMUND IVY GIFFORD, M.B., Ch.B. (Dental Anaesthetist)

MATILDA DOROTHY GODWIN, M.B., B.Ch., B.A.O.

ROSE MACAULIFFE, M.B., B.Ch., B.A.O.

MARGARET OSBOURNE, M.B., Ch.B.

MARGARET W. PETERS, M.B., Ch.B., D.A. (Dental Anaesthetist)

ELEANOR M. PRENDIVILLE, L.R.C.P.I., L.R.C.S.I., L.M., D.P.H.

ZOE RICHARDSON, M.B., B.Ch., B.A.O.

Doris Rogers, M.B., Ch.B. (Resigned (23/3/67)

Е. Sмітн, М.В., В.Ch.

PATRICIA V. TYLER, M.B., Ch.B.

G. ISABEL VILLIERS, M.B., B.Ch., B.A.O. (Dental Anaesthetist)

K. WATWOOD, M.B., Ch.B., L.R.C.P., L.R.C.S.

LUCY M. WILKIN, M.B., B.Ch., B.A.O.

JOAN WRIGHT, M.R.C.S., L.R.C.P.

CHRISTINE H. WILLCOX, M.B., B.S., M.R.C.S., L.R.C.P.

Principal County School Dental Officer

J. C. TIMMIS, L.D.S., R.C.S.

Area Dental Officers

D. R. OGDEN, B.D.S., L.D.S., R.C.S. (S.E. Staffordshire Area)

T. C. J. PRICE, B.D.S., D.P.D. (Mid-Staffordshire Area)

Miss A. P. Wood, B.D.S. (N. Staffordshire Area)

Senior Dental Officers

MISS P. ENSUM, L.D.S. H. W. PRITCHARD, L.D.S.

Whole-Time Dental Officers

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S. FORD, L.D.S., R.C.S.

S. Ford, L.D.S., K.C.S. Mrs. S. J. M. Glover, L.D.S.

J. HICKEY, B.D.S.

J. D. NELSON, L.D.S.

Mrs. C. E. Hughes, L.D.S.

J. W. PRICE, M.B., Ch.B., L.D.S., R.C.S.

MRS. L. E. M. SALISBURY, B.D.S.

M. Wood, B.D.S.

Part-Time Dental Officers

D. C. BUTTERWORTH, B.D.S.

R. BOLTON, F.D.S., R.C.S.

N. K. GREEN, B.D.S.

B. M. Griffiths, B.D.S.

G. M. H. Lees, L.D.S. L. F. Kelly, L.D.S., R.F.P.S.

A. N. PLACE, L.D.S.

J. K. WILLIAMS, L.D.S.
H. J. VILLIERS, B.D.S.
W. H. WALTERS, L.D.S.

Whole-Time Dental Auxiliaries

MISS E. E. BURBURY

Mrs. J. E. Harris (Resigned 17/9/67)

Miss C. D. Jaques Appointed 4/9/67

MISS J. MORRALL

MISS A. E. PRICE (Resigned August 1967)

MISS J. E. RANDLE

MISS P. A. SPRINGER

Dental Hygienist

MISS A. P. PRITCHARD, Part-time

Specialists

PART-TIME CONSULTANT IN CHILDREN'S DENTISTRY:

H. LEVISON, B.D.S., F.D.S., R.C.S., D.Orth.

PART-TIME OPHTHALMIC SPECIALISTS:

J. A. Cox, M.B., B.S., D.O.

CHARMIAN H. LONGMORE, M.B., Ch.B., M.R.C.S., L.R.C.P., D.O.M.S.

D. E. Lyons, M.B., Ch.B., D.O. (Resigned 7/4/67)

E. J. McCabe, M.B., Ch.B., D.O.

B. M. McOwan, M.R.C.S., L.R.C.P., M.B., B.S., D.O. (Ldn.)

PART-TIME ORTHOPAEDIC SPECIALISTS:

*J. HIRTENSTEIN, M.D., F.R.C.S.

M. H. M. HARRISON, Ch.M., M.B., Ch.B., F.R.C.S.

PART-TIME E.N.T. SPECIALIST:

W. D. PATERSON, M.B., Ch.B., F.R.C.S.

PRINCIPAL MEDICAL OFFICER FOR MENTAL HEALTH:

W. JOHNSON, M.R.C.S., L.R.C.P.

CONSULTANT PSYCHIATRIST:

HAZEL B. BAKER, M.B., B.S., M.R.C.S., L.R.C.P., D.P.M.

PART-TIME CONSULTANT PSYCHIATRIST:

*KATHLEEN KEANE, M.B., Ch.B., D.C.H., D.P.H., D.P.M., D.R.C.O.G.

EDUCATIONAL PSYCHOLOGISTS:

D. COOKSON, B.A., Dip. Psych.

MRS. M. D. COOKSON, B.A.

MRS. M. I. CHRISTINE SHEPHERD, B.A.

PART-TIME PSYCHOTHERAPIST:

Y. LEJEUNE, B.A., Ph.D. (Rand)

SENIOR CASEWORK SUPERVISOR (Holding joint appointments):

J. H. SPURR, A.A.P.S.W., R.M.N.D., Dip. Soc. Sc.

PSYCHIATRIC SOCIAL WORKERS:

MISS U. J. NEWMAN, (On Course Sept. '67 to July '68) MRS. N. RASHID, A.A.P.S.W.

MRS. L. WOOD

PART-TIME PSYCHIATRIC SOCIAL WORKERS:

MRS. S. COOKE, B.A., A.A.P.S.W.

MRS. E. GLASS, A.A.P.S.W.

G. KOHLER, B.A., A.A.P.S.W.

AUDIOMETRICIANS:

MRS. E. GOODWIN, S.R.N. Part-time

Mrs. M. Moss

HEALTH VISITORS TO THE DEAF AND PARTIALLY HEARING CHILDREN:

MISS M. L. GIBSON, S.R.N., C.M.B., H.V.

MISS J. ELSMORE, S.R.N., H.V.

PERIPATETIC TEACHER OF THE DEAF:

MISS E. VERNON

VISION TESTING SURVEY:

MRS. E. HORTON, S.R.N.

HEALTH EDUCATION OFFICER:

R. W. Rossington, Dip. H.E.D., M.R.I.P.H.H.

* Attend County Clinics as Regional Hospital Board Officers.

Medical Auxiliaries

PHYSIOTHERAPISTS:

MISS F. M. BARNES, M.C.S.P.

MRS. M. LEWIS, M.C.S.P. Part-time MRS. G. E. MALLETT, M.C.S.P. Part-time

SENIOR SPEECH THERAPIST:

MISS H. M. BINKS, L.C.S.T.

SPEECH THERAPISTS:

Mrs. A. J. Durbin, L.C.S.T. Part-time (Resigned 13/7/67)

Mrs. S. Edwards, L.C.S.T. Part-time

MRS. D. FITZSIMMONS, L.C.S.T. Part-time

MRS. A. M. PRICE, L.C.S.T. (Resigned 6/9/67) MRS. S. R. RUMBLE, L.C.S.T. (Resigned 13/7/67) MRS. J. D. STEWART, L.C.S.T. Part-time

MRS. P. A. VALENTINI, L.C.S.T. Part-time (Appointed 20/2/67)

SUMMARY OF ASSISTANT STAFF

Staff		Establish- ment	No. Employed on 31/12/67	Equivalent in terms of Whole-time Staff
School Medical Officers	• •	 17	29	12.1
Anaesthetists (Dental)		 -	3	0.9
Ophthalmic Specialists		 MARIE TOTAL	6	0.95
A	• •	 0.2	1	0.2
Orthopaedic Specialists		 0.07	2 3	0.07
Physiotherapists		 5	3	2.1
Speech Therapists		 6	5	2.6
School Nurses		 28.5	84	21.0
Clinic Nurses		 *****	11	4.95
School Dental Officers	• •	 25	22	16.5
Dental Auxiliaries		 11	5	5.0
		 33	28	21.4
Dental Technicians		 4	3	3.0
Dental Technician Trainees		 2	1	1.0
Dental Hygienists		 2	1	0.6
Clerks		 22	21	21.0
		 1.2	2	1.2
Vision Testing Survey Nurse	е	 1	1	1
Chiropodists	• •	 48	24	4.8

GENERAL INFORMATION

	Urban Areas	Rural Areas	Admin. County
Estimated civilian population of Admin-	111000		
	417,300	276,660	693,960
Acreage	72,741	584,439	657,200
Density of population per acre	5.74	0.47	1.06
Mean area per person in acres	0.17	2.11	0.95

1.	Estimated School Population of Administrative Co	unty	
	(excluding Newcastle)		100,283
2.	Average attendances (excluding Newcastle)	711	84,420
3.	School Population of Newcastle Excepted District.		13,977
4	Average attendances (Newcastle only)	1.1	12,716
5	Number of schools and departments in the County (exc	1 New	,
٥.	Nursery Schools	71. 1 (0)	8
	County Primary Schools	• •	186
	Voluntary Primary Schools	• • -	175
	County Secondary Modern Schools	• •	46
		• •	40
	Voluntary Secondary Modern Schools	· ·	16
	County Secondary Grammar and High Schools	• •	15
	Comprehensive Schools		12
	Special Schools—Residential		7*
	Day	. • •	2
	Hospital		2
	Total		457
	· ·		

^{*} Includes The Mount School which is jointly maintained by Staffordshire and the City of Stoke-on-Trent.

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Annual Report for 1967

INSPECTIONS AND OTHER EXAMINATIONS

Table 1. Medical Inspection of pupils attending Maintained and Assisted Primary and Secondary Schools (including Nursery and Special Schools).

A. Periodic Medical Inspections:

Age Groups Inspected (by year of birth)	Number Examined
1963 and later 1962 1961 1960 1959	299 4,882 5,971 Entrants (11,152) 951 353
1958 1957 1956 1955 1954	$ \begin{array}{c} 189 \\ 125 \\ 811 \\ 3,062 \\ 1,303 \end{array} $ 2nd Age Group (3,873)
1953 1952 and earlier Total	$\frac{1,109}{6,544}$ 3rd Age Group (7,653)

B. Number of Other Inspections:

Special Inspections	159
No. of Re-inspections	15,531
Total	15,690

Children in the "Intermediate" age group are examined in their first year of secondary education. Consequently, in secondary schools, School Medical Officers combine, in one group of visits, the examination of both the "Leaver" and "Intermediate" age groups.

"Entrant" children are medically examined routinely during the summer Term.

C. Pupils found to require treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin).

Age groups Inspect By year of birth	ed	For defective vision (excl. Squint)	For any other conditions	Total of Individual Pupils
1963 and later		5	51	53
1962		211	732	892
1961		252	1,003	1,184
1960		45	146	182
1959		26	53	76
1958		11	28	38
1957		11	28	35
1956		90	71	147
1955		301	261	531
1954		145	114	235
1953		105	53	150
1952 and earlier		777	458	1,136
Totalo		1.070	2.009	1.650
Totals		1,979	2,998	4,659
				

Table 2(a). Defects found by Periodic Medical Inspections.

Defect			Pe	riodic Insp	pections	
Code No.	Defect or Disease		Entrants	Leavers	Others	Total
4	Skin	T	143	108	97	348
5	Eyes—(a) Vision	O T	172 468	104 882	110 629	386 1,9 7 9
	(b) Soviet	O	404 243	474 25	336 61	1,214 329
		O	70	27	36	133
	(c) Other	T O	22 44	15 58	20 40	57 142
6	Ears—(a) Hearing	T	152	25	47	224
	(b) Otitis Media	O T	247 107	21 27	80 26	348 160
		O	266	29	78	373
	(c) Other	T O	20 30	4 6	15 14	39 50
7	Nose and Throat	T	360	55	85	500
8	Speech	O T	768 112	74 12	241 33	1,083 157
		O	230	12	33	275
9	Lymphatic Glands	O	49 192	1 3	1 40	51 235
10	Heart	T	65	27	28	120
11	Lungs	O	162 149	36 34	49 38	247 221
		0	291	45	118	454
12	Development—(a) Hernia	T O	19 31	6	12	37 37
	(b) Other	T	46	26	39	111
13	Orthopaedic—(a) Posture	O T	223 35	22 4 9	61 40	306 124
10		O	42	39	40	121
	(b) Feet	T O	179 298	68 121	85 115	332 534
	(c) Other	T	81	37	34	152
14	Nervous System—(a) Epilepsy	O	122 16	56 14	59 11	237 41
		O	21	7	9	37
	(b) Other	T O	20 91	5 13	11 24	36 128
15	Psychological—(a) Development	T	65	10	33	108
	(b) Stability	O T	78 74	4 5	30 23	112 102
4.6		O	208	32	123	363
16	Abdomen	T O	30 58	7 14	13 25	50 97
17	Other	T	75 266	21 90	66 157	162 513
TOTAL N	O. OF DEFECTS REQUIRING		2,530	1,463	1,447	5,440
TOTAL N	O. OF DEFECTS TO BE KEPT					
	BSERVATION		4,314	1,290	1,821	7,425
TOTAL DI	EFECTS		6,844	2,753	3,268	12,865

Table 2(b). Defects found by Medical Inspection.

Special Inspections

• :	SPECIAL IN	NSPECTIONS	
Defect or Disease	Defects requiring Treatment	Defects requiring Observation	
Skin Eyes—(a) Vision (b) Squint (c) Other Ears—(a) Hearing (b) Otitis Media (c) Other Nose and Throat Speech Lymphatic Glands Heart Lungs Development— (a) Hernia (b) Other Orthopaedic— (a) Posture (b) Feet (c) Other Nervous System— (a) Epilepsy (b) Other Psychological— (a) Development (b) Stability Abdomen Other	5 7 	1 9 1	
TOTALS	66	76	

Table 3. Parents attending Periodic Medical Inspections

	Age Groups Inspected	No. of Pupils N Examined		% of Parents who attended
	(1963 and later	299	271	90.6
Entrants	₹ 1962	4,882	4,547	93.1
	(1961	5,971	5,517	92.4
	1960	951	855	89.9
	1959	353	270	76.5
	1958	189	149	78.8
	1957	125	84	67.2
2nd Age	∫1956	811	391	48.2
Group	\ 1955 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	3,062	1,285	42.0
	1954	1,303	451	34.6
3rd Age	∫ 1953	1,109	. 222	20.0
Group	1952 and earlier	6,544	825	12.6
			·	
	Totals	25,599	14,867	58.1 %
				 .

Whilst the number of children examined rose by 189 and 1,057 more parents attended, the percentage of parents attending rose from 54% in 1966 to 58% in 1967.

Table 4. Handicapped Children

			No. of	Children r	newly
Category				und during	
and the same		One sim		the year	
Blind	• •			2	1 1 100
Partially Sighted				3	
Deaf				5	
Partially Hearing			• * • *	22	: : :
Educationally Sub-	normal			200	
Epileptic				25	
Maladjusted				253	
Physically Handica	pped			79	
Speech Defects				519	• .
Delicate				160	
	~ .				
			-1	1,268	
				· ·	

The table above does not include children living in the Excepted District of Newcastle. Almost all the children were examined at the school clinics.

Table 5. Notification of Handicapped Pupils leaving School to the Youth Employment Service

No. of children who were advised not to take up certain types of employment	746
No. of children advised to register under the Disabled Persons (Employment) Act 1944	3
	749

A report giving an indication of the type of work for which a child is suitable is issued for each child examined in the "leaver" group for the information of the Youth Employment Service and in addition to the figures in table 5 above reports were issued in respect of 6,240 leavers whose condition was found to be normal.

The arrangement for consultation of the School Medical Officers with the Area Youth Employment Committees prior to committee meetings still continues. In difficult cases the Medical Officer may attend the Committee as an advisor.

It is pleasing to note that certain Youth Employment Officers have stated they have found the medical reports submitted to be most helpful in the correct placing of children. It is regrettable that so many children on leaving school have some type of handicap—albeit a minor one, but they are given effective help in making their way in life. The number of children referred this year shows a decrease of 1,698 compared with 1966.

Table 6. Miscellaneous Examinations at School Clinics

Type of Examination	
Employment Licences	928
Entrants to courses of training for Teachers (4 R.T.C.)	481
Entrants to the Teaching Profession (28 R.Q.)	144
Children boarded out by the Children's Committee	276
Adventure Courses	63
	1,892

All of the examinations were carried out by School Medical Officers at the school clinics and have taken up a large proportion of the time devoted to attendance at the clinics.

The number of employment licence examinations includes five children who were found to be temporarily unfit to undertake part-time employment but who were fit enough to do so within a fortnight of the first examination.

Two boys were found to be unfit to go on Adventure Courses.

Home Visiting

Table 7. Details of home visits made by Nursing Staff

-			No. of
Reason for Visit			Visits
Uncleanliness and verminous cases			1,719
Arising out of medical inspections			802
Arising out of inspection at clinics		• •	284
All skin diseases			242
Aural:—Ears			242
Nose and throat conditions			431
Ophthalmic defects			1,280
Orthopaedic defects			219
Educationally subnormal children			164
Neglected children			383
Infectious diseases			241
Heaf testing			31
National Survey (Health & Developme	ent)		46
Holiday visits to children home from	om sp	pecial	
schools			74
Miscellaneous		• •	2,004
Ineffectual visits	• •	• •	1,093
			9,255

The visitation of children in their homes is an important part of the school nurses' work, for by this it is ensured that children obtain treatment which has been recommended.

Table 8. Details of visits to schools made by Nursing Staff

Reasons for Visit		No. of Visits
Ophthalmic Cases:—		
General	 • •	508
To administer atropine	 	85
Vision testing prior to:—		
Medical inspection	 	705
Attendance at Ophthalmic Clinics	 • •	51
Infectious Diseases	 	53
Hygiene inspections (excluding feet)	 	1,589
Miscellaneous	 	335
		3,326

It will be seen from these figures that the nurses are required to spend a considerable amount of time working in schools and no less than 545 half-days were devoted to foot inspections. The majority of the visits were in connection with general hygiene inspections of heads, hands and feet. The nurses make routine visits to schools each term to supervise the cleanliness of the children, further details of which are to be found on pages 71 to 74.

In addition the nurses attend with the School Medical Officers to assist at routine medical inspections.

TREATMENT

Table 9. Details of treatment given

Eye Diseases, Defective Vision and Squint		f cases dealt with
	By the Authority	Otherwise (Hospital, etc.)
External and other, excluding errors of refraction and squint	351	
Errors of refraction (incl. squint)	1,920	100
Total	2,271	100
Number of pupils for whom spectacles were prescribed	2,313	n/k
Diseases and Defects of Ear, Nose and Th	No. of	cases known een dealt with
Received operative treatment		
(a) for diseases of the ear		
(b) for adenoids and chronic tonsilitis		757
(c) for other nose and throat conditions		
Received other forms of treatment		315
Total	1,	072
Total number of pupils in schools who are known to have been provided with hearing aids		
(a) in 1967		21
(b) in previous years		119
	_	140
	_	

Orthopaedic and Postural Defects Number treated as in-patients in hospitals 159 Number treated otherwise, e.g. in clinics or out-patients' depart-489 ments .. Number treated at school for postural defects 48 696 Diseases of the Skin Ringworm—(i) Scalp 1 (ii) Body 18 Scabies 4 Impetigo 14 Other Skin Diseases 684 Total 721 Child Guidance Treatment Number of pupils treated at Staffordshire Child Guidance Clinics 297 Number of pupils treated by other LEAs 14 Number of pupils treated at Hospitals Total number of pupils who had Child Guidance ... 311

Speech Therapy

Number of pupils treated by Speech Therapists at Staffordshire Clinics Number of pupils treated at other LEAs' clinics	1,089 6 16
Trospitais	
	1,111
Other Treatment Given	
Chiropody	14,217
Miscellaneous minor ailments	537
Respiratory defects	82
Injuries	362
Debility and malnutrition	58
Infectious diseases	29
Abdominal defects	237
Heart conditions	60
Other	290
Total	15,872
Pupils who had a period of con- valescence under School Health	
Service arrangements	78
Pupils who received B.C.G.	
Vaccination	7,076
, , , , , , , , , , , , , , , , , , ,	7,070

Table 10.

SCHOOL HEALTH SERVICE CLINICS

(less the Excepted District of the Borough of Newcastle)

as at 31/12/67

Kemedial Exercises Clinic held	9-0—12-30 Fri. fortnightly	l	1	1	9-0—12-30 Friday	1	9-0—12-30 Fri. fortnightly
Speech Therapy Clinic held	Ø	ĵ	1	1	9-0—4-30 Thursday	1	S
Ophthalmic Clinic held	9-30—12-30 Wed. weekly	1	*	1	•	1-30—4-0 Mons. once a term	ı
Dental Clinic held	9-0—5-0 Daily (not Sats.)	I	. 1	l	1		Mon., Tues. and Thurs. 9-0—5-0
Minor Ailments Clinic held	9-0-10-30 Wed. weekly	1-30—2-0 p.m. Tues. fortnightly	1-30—2-0 p.m. Tues. weekly	1-30—2-0 p.m. Tues. fortnightly	9-0-10-30 Fri. weekly	1-30—2-0 p.m. Wed. weekly	9-0—10-30 Tues. fortnightly
Address	‡ Leighswood Road(Tel. Aldridge 52088)	Memorial Hall Ashley Road off Newcastle Road	District Council Office (Tel. Audley 343)	Central Hall	Δ Princess Street(Tel. Biddulph 2040)	Δ Dr. Cheshire's Surgery Sandy Lane(Tel. Brewood 206)	Δ 36 Pier Street (Tel. Brownhills 2219)
Name of Clinic	Aldridge	Ashley 22	Audley	Barton-under- Needwood	Biddulph	Brewood	Brownhills

				11.				Remedial
	Name of Clinic		Address	Minor Aumenis Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held	Exercises Clinic held
	Cannock	Δ ‡ (I)	Beecroft Road (Tel. Cannock 3715)	9-0—10-30 Mon. & Thurs. weekly	Daily 9-0—5-0 (not Sats.)	1-30—4-30 Fris. and 9-30—12-30 Thurs. monthly	Ω	+-
		(2)	Arthur Street, Chadsmoor (Tel. Cannock 2347)	9-0-10-30 Weds. fortnightly	9-0—5-0 (except Weds. p.m. and Sats. a.m.)	1	W	ı
		(3)	Eskrett St., Hednesford (Tel. Hednesford 2247)	9-0—10-30 Wed. weekly	I	9-30—12-30 Thurs. monthly	1	1
	Chase Terrace	(D.N.)	Salters Meadow Group Practice Centre Sankey's Corner (Tel. Burntwood 218)	9-0—10-30 Tues. weekly	I	I	1	l
23	Cheadle	△	Well Street (Tel. Cheadle 3306)	9-0—10-30 Tues. fortnightly	Daily 9-0—5-0 (not Sats.)	6-30—9-30 Weds. evenings	1-30-4-30 Thursdays	(N.P.)
	Cheddleton		Parish Institute	1-30—2-0 Fri. fortnightly	I	I		I
	Cheslyn Hay		Junior School Hatherton Street (Tel. Cheslyn Hay 398)	9-0—10-30 Mon. fortnightly	l	I	1	ı
	Codsall	◁	Elliotts Lane (Tel. Birches Bridge 3738)	9-0—10-30 Tues. fortnightly	Daily 9-0—5-0 (not Fris. or Sats.)	9-30—12-30 Weds. monthly	9-0—12-30 Wednesday	9-30—12-30 Mons. fortnightly
	Eccleshall		Methodist School Stone Road	9-0—9-30 Fri. fortnightly	I		1	ļ
	Essington		Methodist Sunday School Essington Wood	1-30—2-0 p.m. Wed. weekly	l	I		ı
	Featherstone		United Methodist Chapel	9-0—10-30 Fri. weekly	l	1	-	I
	Gnosall		Memorial Institute	1		1	S	1

Name of Clinic	Great Wyrley		Halmerend	Harriseahead	Huntington	Kidsgrove	Kinver	Leek		Lichfield	
ic	(1)	(2)				++ ⊲		‡ (I)	Δ (2)	(1)	Δ (2)
Address	Great Wyrley Junior School	The Hutments No. 1, Walsall Road	Health Centre High Street	School Clinic High Street	St. Thomas' Church Institute Stafford Road, Huntington	Day Nursery Liverpool Road (Tel. Kidsgrove 2289)	Methodist School Room Potters Cross, High Street	Cripples' Aid Society Clinic Salisbury Street (Tel. Leek 3313)	Haregate Street (Tel. Leek 2886)	Sandford Street (Tel. Lichfield 51212)	Red Court House Tamworth Street (Tel. Lichfield 3656)
Minor Ailments Clinic held	9-0—10-30 Wed. fortnightly	10-30—12-0 Wed. fortnightly	1-30—2-0 Wed. fortnightly	1-30—2-0 Tues. fortnightly	9-0—10-30 Thurs. fortnightly	9-0—10-30 Mon. fortnightly	9-0—10-30 2nd Fri. in month	9-0—10-30 Mon. weekly Thurs. fortnightly	l		9-0-10-30 Wed. fortnightly
Dental Clinic held	I	l	I	l	l	I	I	Daily 9-0—5-0 (not Sats.)	I	Daily 9-0—5-0 (not Sats.)	1
Ophthalmic Clinic held	I		1	1	I	6-0—9-0 p.m. Wednesday (approx. monthly)	l	6-0—9-0 p.m. Thurs.	l	ļ	9-30—12-30 Fri. weekly and Tues. 1-30—4-30 fortnightly
Speech Therapy Clinic held	l	I	1	I	I	9-30—4-30 Friday	1	9-0-4-30 Tues. weekly	Ø	9-0—12-30 Tues. and Fris.	htly
Remedial Exercises Clinic held	!	I	l	l	l	9-0—12-30 Thursday	l	# Mons Fris. 9-0—4-0 (R.H.B. Clinic)	I	I	1

Remedial Exercises Clinic held	1	1	9-0—12-30 Tuesday	I	(N.P.)	1	9-30—12-30 Mons. fortnightly	I	9-0—4-0 Thurs. weekly	1	9-0—12-30 Tues. weekly
Speech Therapy Clinic held	1	1	ω	ω		1	S 9-0—12-30 Weds. & Thurs.	1	1	9-0-4-30 Mon., Tues. and Wed.	9-0—12-30 Mons. and Fris. nally
Ophthalmic Clinic held	*	ı		1	1-30—4-30 Weds. monthly Fri. occasionally	I	1-45—4-45 Thurs. fortnightly	9-30—12-30 Weds. fortnightly	9-30—12-30 Tues. 1-30—4-30 Wed. alternate weeks	1	1-30—4-30 9-0—12-30 Mons. fortnightly Mons. and Fris. Fris. p.m. occasionally
Dental Clinic held	l	1	9-0-5-0 Mobile Weds. and Fris.	1	l	1	I	Mons. 9-0—12-30 Weds. 9-0—5-0	Daily 9-0—5-0 (not Sats.)	I	Daily 9-0—5-0 (not Sats.)
Minor Ailments Clinic held	9-0-10-30 Thurs. fortnightly	10-45—12-0 Mon. fortnightly	9-0—10-30 Mon. fortnightly	9-0—10-30 Thurs. fortnightly	9-0—10-30 Tues. weekly	1-30—2-0 Weds. 1st and 3rd in month	9-0—10-30 Mon. weekly	9-0—10-30 Thurs. fortnightly	9-0—10-30 Daily except Tues. and Sat.	l	9-0—10-30 Thurs. weekly
Address	Village Hall	Community Centre Brownhills Road	New Clinic High Street (Tel. Pesall 2781)	Dr. McCullum's Surgery St. Michael's Road (Tel. Penkridge 300)	Beacon Road, Pheasey Estate Birmingham 22a (Tel. Gt. Barr 2663)	Commemoration Hall	Health Centre, Horsefair (Tel. Rugeley 2244)	Coal Heath Lane off Lichfield Road (Tel. Pelsall 2279)	Lammascote Road (Tel. Stafford 3950)	North Walls (Tel. Stafford 2301)	Rising Brook off John Amery Drive (Tel. Stafford 3372)
Name of Clinic	Madeley	Norton Canes	Pelsall (D.N.)	Penkridge	Pheasey ∆ ‡	Rolleston	Rugeley (D.N.)	Shelfield Δ	Stafford $\triangle \ddagger (1)$	(2)	(3)

Remedial Exercises Clinic held	ļ	1		l	1	ı	l	İ	9-0—12-30 Wed. weekly	I
Speech Therapy Clinic held	1	ν.		1	1	9-0—12-30 Mons. weekly and Fris. once a month	1	1	9-0—12-30 Thursday	1
Ophthalmic Clinic held	1-30—4-30 Mons. monthly	& Fris.	Weds.	1	I	9-30—12-30 Crus. fortnightly	1	*	6-0—9-0 p.m. 9-0—12-3 Mons. fortnightly Thursday	
Dental Clinic held	ı	9-30—12-30 Mons.	1-30-4-30 Tues. & Weds.	I	1	9-0—5-0 Daily (not Sats.)	I	ı	1-30—4-30 Mons. & Tues. 9-30—12-30 Weds. & Thurs.	I
Minor Ailments Clinic held	9-0—10-30 Thurs. weekly	! [9-0-10-30 1st Fri. in month	9-0—10-30 Thurs. weekly	9-0—10-30 Thurs. weekly	1-30—2-0 Fri. fortnightly	1	9-010-30 Fri. weekly	9-0—10-30 3rd Wed. each month
Address	 ∆ (1)‡ St. Michael's Hall Lichfield Road The Community Centre 	Whitemill Road, Walton Kitchenor Institute	victor Street (Tel. Stone 3909)	Foley Road off Blackwood Road (Tel. Streetly 1435)	Cross House (Tel. Kidsgrove 2998)	School of Industry Marmion Street (Tel. Tamworth 2197)	Church Hall	Tutbury Institute	Heath House Cheadle Road (Tel. Uttoxeter 2555)	Primitive Methodist School Lichfield Road
	Δ (I)‡ (2)	(3)				∢	(I) A	(2)	4	
Name of Clinic	Stone			Streetly	7 Talke	Tamworth	Tutbury		Uttoxeter	Walsall Wood

Remedial Exercises Clinic held	1		and the second s
Speech Therapy Clinic held	T	ļ	-0—12-30 rriday
Ophthalmic Clinic Speech Therapy held Clinic held	I	2-15-4-30 Tues. fortnightly	9-30—12-30 9-0—12-30 Weds. monthly Friday
Dental Clinic held		1	-
Minor Ailments Clinic held	9-0—10-30 Wed. monthly	9-0—12-0 2nd Thurs. in each month	9-0-10-30 Tues. fortnightly
Address	Village School Hall	Parish Room	△ Mill Lane (Tel. Wombourne 2495)
Name of Clinic	Werrington	Wilnecote	Wombourne

In addition to these fixed clinics seven mobile dental clinics are in use in the following areas. (more information is to be found on page 47)

* Clinics are also held on these premises as and when necessary.

† An Orthopaedic and Physiotherapy Clinic is also held daily from 9-0-5-0 except Saturday.

‡ Ultra Violet Light Clinics held on these premises once or twice weekly.

(D.N.) Doctor's Clinic alternating with Nurses' Clinic.

For details of Child Guidance Clinics please see page 40.

(N.P.) Remedial Exercise Clinic staffed by a nurse who is not a qualified physiotherapist.

S Speech Therapy Clinic which will be manned as and when the staffing situation allows.

Δ E.N.T. Clinics held as and when required.

Table 11. Summary of Clinics

Kind of Clinic			Number of premises used by Authority	No. of premises used under R.H.B. arrangements
Dental			 *27	1
Minor Ailment			 47	
Ophthalmic			 21	
E.N.T.			 16	
Orthopaedic			 1	—
Speech Therapy			 12	
Physiotherapy	• •		 11	3
Remedial Exercises			 3	_
U.V.L.			 . 5	
Chiropody	• •		 47	Advisions
Audiology			 1	
Diagnostic Units—	Menta	ally		
handicapped			1	

^{*} includes seven mobile clinics.

Table 12. Minor Ailments Clinics

No.	of Clinics	 	 47
No.	of first visits	 	 1,819
No.	of re-visits	 	 5,128

The children, attending minor ailment clinics for the first time, were found to have 2,082 conditions requiring treatment.

The School Medical Officers also carried out the examinations detailed in Tables 4 and 6 on pages 15 and 16 at School Clinics generally after the minor ailment clinic had been held.

Table 13. Diseases and Defects found at Minor Ailment Clinics

	Disease or Defect						
Defective vis	sion				• •	302	
Squint				• •		6	
Blepharitis			• •		• •	2	
Conjunctivit	is		• •		• •	9	
Styes		• •		• •	• •	17	
Other eye de	# 0 · 0				24		

Enlarged tonsils and/or ad	enoids			57
Other defects of nose and	throat	• •	• •	10
Defective hearing		• •		64
Otitis media			• •	13
Other defects of ears			• •	31
Speech defects			• •	51
Cough or catarrh	• •	• •	• •	21
Bronchitis			• •	25
Asthma				27
Ringworm—Body			• •	18
Scalp	• •			1
Scabies		• •	• •	4
Impetigo	• •		• •	14
Septic sores	• •	* •	• •	62
Warts—General	• •		• •	56
Plantar		9 8		477
Boils	• •	0	• •	8
Other skin defects		• •	• •	48
Major injuries (including f	racture	s)	• •	8
Burns		• •	• •	5
Sprains or strains	• •	• •	• •	25
Other minor injuries			• •	34
Heart conditions			• •	8
Rheumatic conditions	• •	• •	• •	11
Debility and malnutrition		• •	• •	58
T.B. Glands—Cervical	• •	• •		1
Abdominal			• •	4
Posture		• •	• •	11
Flat feet		• •	• •	45
Other orthopaedic defects	• •	• •	• •	67
Other defects	• •	• •	• •	448
				2 082

Table 14. Ophthalmic Clinics

	External Eye De				
No. o	of children examin of children attendi of re-visits	ng for th	he firs	t time	e
	of re-visits of children for wh		rtacles	Were	a
	escribed	··	··	·	•
Anal	ysis of major defec	cts found	d amo	ng ne	ew cas
Erre	ors of Refraction:—				
	Hypermetropia				
	Hypermetropic astigm	atism			
	Compound hypermetr				
	Myopia				
	Myopic astigmatism				
	Compound myopic as				
	Mixed astigmatism				
	Anisometropia				
Die	eases and Abnormalities:—				
		*			
Lid	s and conjunctiva:—				
	Blepharitis	• • • • •			
	Ptosis Epicanthus	• • • • •		• •	• •
	Amblyopia				
Cor	rnea:—				
	Nebulae of cornea				
	Ulceration of cornea		• •		• •
Len	es:—				
	Lamellar cataract				
Mu	scles:—				
	Frolich's Syndrome				
	Nystagmus			• •	
	Strabismus				
	Exophoria				
			••		

The staff has worked continuously throughout the year but there are still one or two clinics which have waiting lists.

The total number of children examined was 972 less than in the previous year and the number of re-visits increased by 28.

The system has continued whereby a school nurse is engaged whole time in testing the vision of the 8-year age group. 5,101 children were examined, 629 were found to have defective vision of whom 283 were already under treatment and supervision. Nearly all the 346 newly found cases were offered examination at School Eye Clinics.

The School Medical Officers are also encouraged to perform vision tests at the routine examinations of those school entrants who are able to co-operate.

To the 163 old cases of squint were added 170 children newly found to be suffering from squint and a number were referred to various hospitals for orthoptic treatment or operation.

Chiropody

The School Health Service continued to utilise the Chiropody Service and the Education Committee bore 20% of the cost. Five full-time and nineteen part-time chiropodists were employed for a total of 131 sessions weekly. The greater part of the treatment was carried out on school premises. Head Teachers have been most co-operative and have said they find this arrangement causes only a minimum of disruption to the school and the child's education.

Since the inception of the chiropody service, 7,858 children have been referred for treatment. During the year there were 2,115 new referrals and 14,217 treatments were given. The majority of the treatments during the year were for verrucae pedis.

Table 15.

Cannock Orthopaedic Clinic

No. on register at end of December, 1967	121
No. of new cases	62
No. discharged after maximum benefit	20
No. of cases lost sight of, etc	30
No. of attendances for physiotherapy	2,652
No. of attendances for ultra violet light	
treatment	426
No. of examinations by Orthopaedic	
Surgeon	155

Table 16. Defects under observation and treatment at Cannock Clinic

Anterior poliomyeli	itis				2
Bursitis	• •		• •		2
Club foot	• •	• •	• •		1
Dislocations	• •	• •	• •		1
Exostosis os calcis	• •	• •	• •		1
Flat feet			• •		47
Hallux Valgus	• •		• •		7
Hammer toes			• ,		7
Hemiplegia			• •		1
Knock knees	• •				23
Kyphosis	• •	• •	• •		7
Pes Cavus	• •				20
Poor posture				• •	4
Schlatter's Disease	• •		• •		2
Scoliosis					6
Spastic	• •				2
Spina Bifida	• •	• •	• •		1
Wry neck	• •				1
Other conditions	• •			• •	6
					141

Table 17. Treatment at Remedial Exercise Clinics

Clini	с	No. of children referred	No. of children whose treat-ment was completed	No. of children discharged	No. on Register at 31/12/67	No. of treatments given
Aldridge		 22	9	5	12	157
Biddulph		 23	1	10	10	99
Brownhills		 24	5	9	21	181
Codsall		 6	5	2	2	57
Kidsgrove		 47	27	14	18	219
Pelsall		 14	1		13	86
Rugeley		 15	10	3	11	159
Stafford		 60	31	18	30	681
Uttoxeter		 35	21	7	18	378
		246	110	68	135	2,017

The following table shows the main defects which were having or awaiting treatment at the end of the year.

Table 18.

Cli	inic			Posture	Breathing exercises	Defects of legs & feet	Other
Aldridge		 			83	36	
Biddulph		 		19	34	13	
Brownhills		 		21	62	51	
Codsall		 		1	8	28	
Kidsgrove		 		45	75	31	63
Pelsall		 		6	10	41	9
Rugeley		 	• •	2	27	74	9
Stafford		 		73	19	166	17
Uttoxeter		 		29	50	75	-
				196	368	515	98

Ear, Nose and Throat

1,414 children were referred for examination at 71 clinic sessions compared with 1,493 in the previous year. 1,115 children were examined by the part-time County Ear, Nose and Throat Consultant and of these 620 were found to have significant defects. (Table 20 gives the analysis of defects found.) Out of this number 327 (305 in 1966) were subsequently referred to hospital for treatment. The majority were suffering from enlarged tonsils and/or adenoids or required investigations of sinus infection. Those who needed non-operative treatment were referred to their own doctor.

There were 87 children found to be suffering from some degree of deafness, of whom 29 were recommended for a special school and of this number 28 were admitted and the remaining child was on the waiting list at the end of the year. Sixteen children were referred to the peripatetic teaching service. Twenty-one children were provided with hearing aids and the remaining 21 children were given the benefit of a place near to the teacher during oral instruction and given as much additional help as possible at the ordinary day schools.

In addition, 208 children with enlarged tonsils and adenoids were considered by the School Medical Officers to require treatment and were referred to hospital after notification had been sent to the private practitioner.

A total of 529 children was referred to hospital.

Admissions to Needwood School

Partially hearing children, potentially suitable for admission to Needwood Special School, from Staffordshire and other Local Education Authorities, were examined during the year by the Diagnostic Team which consists of the County E.N.T. Consultant and the Headmaster of Needwood School and the Senior Medical Officer for Schools.

The Team held 4 diagnostic sessions at Needwood School and saw 27 children as a result of which 9 Staffordshire children and 13 children from other areas were recommended for special schooling.

The E.N.T. Consultant made 4 routine visits to advise and supervise treatment of children at Needwood.

Of the more severe cases of deafness 29 children were recommended for admission to special schools and 16 were

children from Staffordshire. The recommendations were as follows:—

For Needwood Special School for the Partially Hearing:—
22 children including 9 from Staffordshire.
For the Mount School, Stoke-on-Trent, 4.
For Dockray Nursery Unit in Manchester, 2.
For the Braidwood Day School, Birmingham, 1.

The following tables give details of the work which has been carried out at the various ear, nose and throat clinics.

Unics 1967	No. of children not needing treatment or observation	22 12 12 12 13 13 13 14 18 18 18 18	495
d Throat C	No. of children referred to Hospital	26 6119 133 333 333 134 137	321
ar, Nose an	No. of children found to have defects	23.2 2.2 2.4 4.7 5.8 5.4 4.2 5.3 5.4 4.4 5.5 5.4 4.4 5.5 5.4 5.4 5.4 5.4	620
lating to E	No. of children who did not attend	L1820 00 1187 1264 1366 1366 1366 1366 1366 1366 1366 13	299
Summary of Statistics relating to Ear, Nose and Throat Clinics 1967	No. of children referred for examination	240 000 000 000 000 000 000 000 000 000	1,414
mmary of S	No. of Sessions	พบีน พบ พบ พบี พบ พ พบัน พบ พบั พบ พ	71
Table 19. Su	Clinic	Biddulph Brownhills Cannock Cheadle Keele Kidsgrove Leek Lichfield Pheasey Rugeley Shelfield Stafford Stone Tamworth Uttoxeter Wombourne	

Table 20. Analysis of defects found at County Ear, Nose and Throat Consultant Clinics

Tonsils and/or adenoids			281
Catarrhal otitis media	• •	• •	143
Chronic otitis media	• •	• •	143
D - di1 4-14	• •	• •	1
	• •	• •	21
Healed suppurative otitis media		• •	21
External otitis and aural polypi			3
Deafness			87
Sinus investigation			23
Rhinitis			2
Epistaxis		• •	6
Wax			43
Speech defect			1
Mouth breather			2
Cleft palate			
Dental defects			1
Deflected nasal septum			2
Observation			1
Eustachian obstruction	• •	• •	2
Lustaeman oostraction	• •	• •	2
			620
			020

A report on the Peripatetic Service for Partially Hearing Children in the County of Stafford

Information for this report has been supplied by one of the peripatetic teachers.

The following report is based upon information which the peripatetic tutor of the partially hearing has kindly supplied.

"A considerable number of children in need of supervision at home and school, have been referred during the year. The younger ones require regular home visits for auditory training and parent guidance. During the early school years a close co-operation between the teacher of the deaf and the class teacher has aimed to provide the greatest help and stimulus for the child, both in school subjects and the maintenance or acquisition of accurate speech. Where appropriate loop inductance systems have been installed in the classroom, or commercial hearing-aids provided. Older pupils have been supervised by occasional visits to schools, so that progress can be ascertained, and help or advice given to staff or pupils as required.

During the year the Stafford Nursery Unit has grown, and is now held each morning, by kind permission in St. Joseph's Convent. Eight pre-school children benefit considerably from the stimulus of group play and work, also individual speech lessons. A teacher of the deaf is in charge of the Unit, which it is hoped will be housed in more permanent accommodation before long."

Audiometric Survey

The Audiometricians continued to test the hearing of children of 6 years of age, *i.e.* those born in 1961. Children of various ages, who were presented by head teachers because of a suspicion that hearing was defective, continued to be seen.

The results continue to show the need of examination by an Ear, Nose and Throat Surgeon.

The County Council, in co-operation with Newcastle Excepted District, continued to employ a part-time audiometrician for two sessions per week in the north of the County.

Table 21.

	No. examined	No. with hearing abnormal	% with hearing abnormal
Absentees in 1966	1,400 8,985	187 919	13.3 % 10.2 %
Children of various ages presented by teachers	125	59	47.2%
	10,510	1,165	

Number of schools visited: 336 in 1967, as against 375 (1966).

In addition, there has been a re-test of 355 children whom it has been considered advisable to keep under supervision. Of these 222 were still found to have a loss of hearing and arrangements were made for them to be examined by the County Ear, Nose and Throat Consultant.

Teachers presented 125 children, whose hearing ability was suspect in their opinion, to the visiting audiometricians. They were children of all ages outside the 6-year age group being tested. No less than 59, or 47.2%, were found to have a hearing loss requiring further investigation which was arranged.

There were 1,891 children absent from school at the time of the audiometrician's visit and arrangements will be made for them to be tested during 1968.

The 1,891 children found by the audiometrician to have defective hearing were referred for examination to the County Ear, Nose and Throat Consultants and during the year it was possible to make appointments for 925 of them at the various clinics. 415 of that number were found to require treatment and an analysis of the conditions found is given in the following table.

Table 22. Analysis of Cases of Suspected Deafness referred to County Ear, Nose and Throat Consultants from Audiometric Survey

Dea	afness Confirmed	
A.	Remediable:	
	Deafness due to wax	36 15
		51
_		
<i>B</i> .	Probably Permanent:	
	Congenital malformation of ear Deafness due to congenital, nerve and mixed	4
	causation (of varying degrees of severity)	66
		70
Cor	nditions other than Deafness	
A.	Infective:	
	Tonsils and/or adenoids	85
	Catarrhal otitis media	80
	Chronic otitis media	45
	Healed suppurative otitis media	19
	Acute suppurative otitis media	13
	External otitis and aural polypi Radical mastoid	4
	Sinus infection	20
	1 20 - 1 .	271

B. Non-infective:

Mouth breather				 	5
Speech defects				 	4
Epistaxis				 	3
Rhinitis				 	4
Foreign body				 	1
Cleft palate				 	1
Deviated septum				 	2
Dental defects				 	1
Unco-operative			"	 	2
					23
Grane	d To	tal		 • •	415

The children in the "Probably Permanent Deafness" group were suffering from defects most of which could be assisted by the provision of a hearing aid. In the group of "Infective Conditions", the vast majority can be cured or improved by early medical treatment but, in the absence of this, permanent loss of hearing might develop.

The 36 children with wax in their ears had some degree of deafness which only constituted a handicap until the wax was removed.

Hearing Aids

It is known there are 140 children in this County who have been fitted with hearing aids and of this number, 21 were newly supplied during the year.

Child Guidance

Some reorganisation of clinics has been necessary during the year. Dr. W. Johnson, the Principal Medical Officer for Mental Health, has transferred from the Stafford to the Newcastle Clinic which is now held on Tuesdays and Thursdays. Dr. Hazel Baker, full-time Psychiatrist, now holds clinics at Lichfield (Mondays, Wednesdays and Thursdays) and Stafford (Tuesdays and Fridays). Dr. K. Keane, a Psychiatrist provided by the Regional Hospital Board, continued with the half-day weekly Clinic at Wombourn.

At the end of the year there were two full- and one parttime Educational Psychologists and seven Psychiatric Social Workers (including one seconded on a P.S.W. Course) working a total of 41 sessions per week. A full child guidance team has been maintained at each of the four Clinics. The total number of clinic sessions held during 1967 with a Psychiatrist in attendance was 582, the number of children treated being 297. Fourteen Staffordshire children were treated by other L.E.A.s or at hospitals. Eight children were seen at Lichfield Clinic for the Burton-on-Trent Authority.

Cases referred to the service during the year totalled 358 and new cases seen for the first time by the psychiatrists amounted to 264, of whom 16 were under five years of age. It is a desirable development that a number of children are being referred to the clinics at an earlier age as maladjustment responds more readily to treatment at this stage.

Table 23. Child Guidance Clinics

	1			
Stafford		13 Lichfield Road (Tel. 52318)	Tuesdays and Fridays all day	Dr. Hazel Baker
Newcastle		Brampton Trees Hanover Street (Tel. 65743)	Tuesday all day Thursday a.m.	Dr. W. Johnson
Lichfield		Sandford Street (Tel. 51212)	Monday all day Wednesday all day Thursday all day	Dr. Hazel Baker
Wombourn		Mill Lane Wombourn (Tel. 2495)	Thursday a.m.	Dr. K. Keane

Table 24. Speech Therapy Clinics
Summary of Statistics relating to children attending Speech
Therapy Clinics during the year

	1)				
County Clinics	No. of Children having periodic observation	No. of Treatments given	No. of Children under Treatment at 31/12/67	No. of Children awaiting Treatment at 31/12/67	No. of New Cases during the year	No. of Children discharged during the year
Aldridge Biddulph Brownhills Cannock Chadsmoor Cheadle Codsall Gnosall Kidsgrove Leek Lichfield Pelsall Penkridge Rising Brook Rising Brook Rugeley Shelfield Stafford Stone Tamworth Uttoxeter *Werrington	15 41 58 17 54 42 63 2 29 72 31 19 2 35 22 26 295 8 105 114	273 595 350 139 249 171 294 260 571 929 359 143 226 311 199 159 721 238 264 222 29 581	36 41 35 31 25 6 20 16 32 55 16 6 5 19 8 20 44 8 20 12 —	1 10 11 7 2 4 - 3 4 27 - - 14 18 - 5 - 5	13 24 10 11 12 9 25 6 27 64 17 3 — 50 16 3 117 5 23 39 — 16	34 35 42 18 17 15 20 5 48 76 9 19 6 23 2 18 124 11 31 17
	1,102	7,283	479	113	490	610

^{*} Werrington Clinic closed — 13/2/67.

Table 25.	ho	of Children aving speech herapy at
Hospital or Authority's Clinic		31/12/67
Burton-on-Trent C.B	 	5 16 1
		22

Table 26. Diagnosis of Children attending County Speech
Therapy Clinics during the year

	Boys	Girls	Total
Cleft palate	 18	10	28
Cluttering	 	4	4
Dysarthria	 25	10	35
Dysenia	 25	14	39
Dyslalia (multiple)	 478	172	650
Dyslalia (simple)	 230	99	329
Dyslalia Rhotacism	 	1	1
Dysphasia	 3	2	5
Dysphonia	 17	6	23
Indistinct speech	 35	6	41
Nasality (excessive)	 10	10	20
Nasality (insufficient)	 9	4	13
Retarded language	 39	19	58
Retarded speech	 184	61	245
Sigmatism	 1	3	4
Stammering	 186	50	236
Stammering and Dyslalia	 59	32	91
Total	 1,319	503	1,822

Two whole- and one part-time speech therapists resigned and one whole-time therapist decided to work only part-time after her marriage and one part-time therapist rejoined the staff. By the end of the year, five speech therapists were working for the County. Their time was equivalent to 4 full-time therapists, which left the establishment short of 2 whole-time staff.

One therapist devoted two mornings a week to visiting Wightwick Hall special school for the physically handicapped and one afternoon a week was paid to visiting the William Baxter day special school.

Ultra Violet Light Clinics

There was a big drop in the number of children referred for treatment, 22 compared to 74 in 1966 and a fall in the number of treatments given, viz.: 740 this year as compared with 1,753 in 1966.

The following analysis shows the conditions from which the children were suffering together with the results of treatment.

Table 27.		No	Treatment
Diagnosis	Benefit	Benefit	
Anaemia	2	1	1
Anorexia	2 2 3	_	
Asthma		-	-
Bronchitis	4	-	1
Chronic Bronchitis and			
Asthma	1	Agenty-spine.	-
Chronic Respiratory Infection	n 5	1.7	1
Chronic Tonsils and		1	
Adenoids	5	1	4 -
General Debility and	3	4	1
General Debility and Bronchitis	2		
General Debility and	4	-	
Frequent Colds	2	2	
Psoriasis	ī	_	
Recurrent Coughs and	•		
Colds	6		
,			
	33	6	2
	******	And property lies.	-
Hospital Treatment			
Table 28.			
(i) Treatment of Tonsils a	nd Adenoid	s:	
No. of children referre	d by School	l Medical	
Officers and County E			466
No. of children so re-			
operative treatment	nt		310
Total number of child			
pitals who receiv	ed operati	ve treat-	
ment			757
No. who had treatm			1.01
nose and throat c			279
No. of children awaiting	ng treatmer	it,	698

Full information is not received from all hospitals in regard to treatment of these cases. Hospitals endeavour to co-operate by giving priority to urgent cases, but there is often a substantial period of waiting involved before the operative treatment can be obtained. The School Health Service helps by continuously reviewing the children on the waiting lists. 19 of the children were treated as out-patients.

(ii)	Orthopaedic Treatment:	
	No. of children referred to Hospitals	 226

(iii) Orthoptic Treatment:

Table 29.

No. of children newly referred to Hospitals during the year

Birmingham & Midland Eye Hospital	1
Burton-on-Trent Hospital	12
Buxton	1
Corbett Hospital	1
Derby Royal Hospital	12
Lichfield Victoria Hospital	41
Newport	1
North Staffs. Royal Infirmary	32
Staffordshire General Infirmary	115
Sutton Coldfield, Good Hope Hospital	17
Tamworth, St. Editha's Hospital	22
Walsall General Hospital	28
Wolverhampton Eye Infirmary	64
	353

REPORT OF THE PRINCIPAL COUNTY SCHOOL DENTAL OFFICER

Staff

The number of dental officers of all grades employed at 1st January 1967 was the full-time equivalent of 18.5, rising to a maximum during the year of 19.4, but falling to 16.5 at 31st December. The average full-time equivalent for the year as a whole was 18.6 giving a staffing ratio of one dental officer to approximately 5,100 schoolchildren. Whilst this ratio is better than that obtaining in many previous years it is not sufficient to allow full dental treatment to be given to all Staffordshire children and several areas of the County remain with only emergency cover. It is regrettable that the number of dental officers had declined by the end of the year and there exists no sign of dental surgeons being attracted to the School Dental Service.

Of the four established Senior Dental Officer posts, two, those at Lammascote Road and Rising Brook Clinics, Stafford, remained unfilled throughout the year, with the post at Codsall becoming vacant owing to a resignation in September. Despite repeated advertising it has been impossible to fill these vacancies and treatment at these clinics has been carried out by several part-time officers. Nevertheless it is hoped that as a result of the implementation by the County Council of the new Whitley Council scales for all grades of dental officers some improvement of the staffing position will take place in the future. According to statistics of the Department of Education and Science Staffordshire's staffing ratio of one dental officer to approximately 5,100 schoolchildren is almost exactly the average for the country as a whole.

the same that the the

Dental Ancillary Workers

As reported at length in last year's Annual Report, it is considered that Dental Auxiliaries make a valuable contribution to treatment and to dental health education and it is County policy to try to increase the number employed. It is, therefore, a matter of regret that the difficulties experienced in recruiting dental officers has prevented the employment of additional Dental Auxiliaries, it having been necessary to turn down at least two applications owing to the impossibility of arranging for their supervision by dental officers. The number of whole-time Dental Auxiliaries has remained at five throughout the year, one resignation being replaced immediately.

The one Dental Hygienist employed part-time has continued her duties unchanged throughout the year and has continued to carry out one session per week at the dental department of the Staffordshire General Infirmary.

It is a fact in the School Dental Service that the overall efficiency of the inspection and treatment service improves in direct ratio with a good staffing position and, in turn, that dental ancillary workers in these conditions are able to give even greater help and reinforcement to the professional staff.

The full-time equivalent of Dental Surgery Assistants employed was 23.5 at the beginning of the year and had fallen to 21.4 at 31st December, the average full-time equivalent for the year being 23.7. Mrs. Audrey Jennings, the Supervising Dental Surgery Assistant for some 15 years, retired in July, Miss M. M. Topham being appointed in her place and taking up her duties on 1st September. Dental Surgery Assistants are encouraged to study for the examination of the Dental Nurses' Association in order to improve their knowledge and understanding of dentistry and two were successful in passing the examination in May. In order to improve facilities for such study locally, a course of evening lectures was instituted at the Elms Technical College, Shelton, Stoke-on-Trent, in September given by Mr. H. Levison, the County Consultant in Child Dentistry and by Mr. J. C. Timmis, the County Dental Officer. This course of some eight months' duration is being attended by several dental surgery assistants on the staff of the County Council together with those from other local authorities, hospitals and private practice.

The staff of the County Dental Laboratory have continued to construct orthodontic appliances, dentures, ear moulds and demonstration models to the prescriptions of the dental officers. Following an inspection of the laboratory by Regional Officers of the Ministry of Health, approval of the laboratory for the training of dental technician apprentices was not forthcoming, mainly on the grounds that the inadequate premises prevented the installation of the equipment necessary to provide apprentices with wide experience of all techniques. As a result of this decision one of the probationary apprentices left for other employment whilst the other has remained as a trainee dental technician. One dental technician resigned in October leaving the laboratory staff in post at the end of the year at one Maxillo-Facial Technician-in-Charge, two Dental Technicians and one Trainee. As a result of the 1966 boundary changes and shortage of dental officers the work of the laboratory is not increasing and with forthcoming retirements on reaching retirement age,

it is foreseen that a reduced staff of some two dental technicians will be able to carry out the work required. Here again, of course, an improvement in the number of dental officers would bring about an increase in the amount of work carried out by the County Dental Laboratory.

Clinics and Equipment

The following is a list of dental clinics in the County showing where it has been possible to provide either whole- or part-time treatment:—

Lammascote Road, Stafford	No. 1 surgery	W/T P/T P/T
Rising Brook, Stafford	No. 1 surgery	W/T W/T
Stone		P/T
Leek		W/T
Uttoxeter		P/T
Cheadle		W/T
Cannock	No. 1 Surgery	W/T
	No. 2 surgery (auxiliary)	W/T
Chadsmoor		P/T
Lichfield	No. 1 surgery	W/T
	No. 2 surgery (auxiliary)	W/T
Tamworth		W/T
Rugeley Health	No. 1 surgery	opening
Centre	No. 2 surgery (auxiliary)	P/T
II. J., f J	NT - 1	1/1/68
Hednesford	No. 1 surgery	opening P/T
		1/1/68
Codsall	No. 1 surgery	W/T)
	No. 2 surgery (auxiliary)	
	P/T fr	om 1/9/67
Aldridge		W/T
Brownhills	No. 1 surgery	W/T
	No. 2 surgery (auxiliary)	P/T
Pheasey		P/T
01 10 11	closed Novem	
Shelfield		P/T

Rugeley Health Centre was opened in March, containing a well-planned dental suite with two surgeries. These surgeries have been fully equipped but it was not possible to recruit dental staff to work in them. Arrangements have been made, however, for the dental officer and dental auxiliary at Rising Brook Clinic, Stafford to start part-time duties at Rugeley at the beginning of 1968 in order to provide some much-needed dental services in the area. Following an offer of part-time work, the main surgery at Hednesford Clinic was fully equipped by the end of the year and dental services started on 2nd January, 1968.

The seven mobile dental clinics were employed during the year in the following areas:—

Mobile No. 1	Wombourn/Great Wyrley	 P/T
Mobile No. 2	Gnosall/Stafford/Hazel Slade	 P/T
Mobile No. 3	Seisdon Rural District	 W/T
Mobile No. 4	Kidsgrove	P/T
Mobile No. 5	Knypersley/Biddulph	 W/T
Mobile No. 6	Pelsall	 P/T
Mobile No. 8	Essington/Featherstone	 P/T

The two mobile clinics delivered in 1966, numbers 1 and 8, which are of more compact design and incorporate lessons learnt regarding heating and plumbing, have given every satisfaction. Dental officers concerned reported good working conditions and little trouble even during severe weather conditions. The deteriorating condition of numbers 2 and 5 mobile clinics (delivered respectively in 1950 and 1951), together with increasing faults in the electrical and plumbing systems, are making their continued use somewhat uneconomic and it is considered that they are now approaching the end of their useful life. Towing them is difficult and in addition their large size precludes their use on smaller school premises.

A total of 1,570 sessions were worked in mobile clinics during the year, an increase of 514 sessions over the previous year.

A total of 198 voluntary evening sessions were worked during the year at Brownhills, Aldridge, Codsall, Cannock, Kidsgrove and Stone Clinics, thus assisting to some extent towards meeting treatment needs.

The arrangement with Wolverhampton County Borough Council, whereby Staffordshire children around the northern and western circumference of Wolverhampton are able to receive emergency dental treatment at the Wolverhampton

Authority's Red Hill Street Clinic, instead of perhaps making long and difficult journeys to one of the Staffordshire clinics has continued and this help was much appreciated.

Progress continued during the year in keeping dental surgery equipment fully up-to-date. Every surgery in use has an airotor high-speed drill, modern general anaesthetic machine and shadowless operating lights. Several more clinics were provided with aspirators and in new clinics equipment of the moveable type in contrast to fixed units was provided, allowing greater flexibility in arrangement to suit individual operators. The report of the inspecting dental officer of the Department of Education and Science, following his visit in September, commends the Authority on its equipment policy.

Inspection and Treatment

The totals of dental inspections, attendances and the types of treatment carried out appear on page —. No direct comparisons can be made with the previous year during which boundary changes occurred. For interest's sake, however, totals for 1966 appear in the following paragraphs in brackets. It will be noted that efforts have been successfully made to follow the opinion expressed in the report on the Service by a dental officer of the Department of Education and Science, that more routine inspection of pupils at school should be undertaken.

A total of 35,187 (25,431) children, together with 11,463 (9,566) inspected at clinics, were routinely inspected at school, of whom 27,155 (22,108) were found to require treatment and 24,788 (20,643) were offered treatment. Approximately 92 (90) children were inspected during each half-day session at school. A further 3,645 (3,010) children were re-inspected during the year, of whom 1,810 (1,834) required treatment. A total of 693 (711) half-day sessions were spent, mainly by the dental auxiliaries, in carrying out dental health education by means of talks, films and demonstrations at schools and clinics.

16,180 (14,763) individual children made 43,849 (44,032) attendances for treatment, the average number of visits per child being 2.7 (2.9). 17,297 (15,725) courses of treatment were started of which 14,062 (12,414) plus 2,330 (2,071) emergency treatments were completed. On average there were 5.4 (5.2) patient attendances for all kinds of treatment per half-day session.

8,149 (9,143) fillings in deciduous teeth and 28,132 (29,746) fillings in permanent teeth were carried out. 15,046 (13,165) deciduous teeth and 4,560 (3,643) permanent teeth were extracted, the ratio of permanent teeth conserved 24,156 (25,368) to permanent teeth extracted 4,560 (3,643) being 1:5.3 (1:6.9). This drop is probably a reflection on the greater number of children inspected which disclosed more badly decayed teeth requiring extraction.

5,402 (4,404) general anaesthetics were administered almost entirely by medically qualified specialist anaesthetists and by one medically qualified dental officer on the staff.

102 (106) children were supplied with dentures whilst a total of 131 (125) dentures were constructed in the County Dental Laboratory for schoolchildren.

The dental staff spent some 6.3% (5.7%) of their time on the treatment of pre-school children and expectant and nursing mothers. Every effort is made to encourage parents to bring their young children to the clinic for inspection so that, if necessary, treatment can be given before serious trouble occurs and in order that advice on dietary care and oral hygiene can be given. Every effort is made to give treatment as a priority to the handicapped pupils of special schools but shortage of staff places some limitation on these efforts.

The Consultant in Children's Dentistry has continued to work six half-day sessions per week in the County Council's clinics, carrying out orthodontic treatment and being available to advise dental officers on all aspects of dentistry. His help is extremely valuable and much appreciated and renders it unnecessary to refer the majority of patients to hospital.

The Consultant Oral Surgeon at the Staffordshire General Infirmary also carries out one session per week at Lammascote Road Clinic, Stafford. This made it possible to refer patients requiring minor oral surgery and difficult extractions to the clinic, thereby again reducing considerably the number of patients who would otherwise need to be referred to hospital.

Dental Health Education has continued throughout the year and great importance is attached to prevention of dental disease by disseminating, as widely as possible, knowledge of oral hygiene and diet. The overall programme of dental health education is arranged by the County Health Education Officer in close collaboration with the County Dental Officer. Dental health forms an integral part of general health education lectures in schools given by members of the Health Education staff and

in addition the dental auxiliaries also spend about one day a week talking to pupils, showing films, arranging poster displays and essay and painting competitions in schools and in welfare clinics. Members of the dental staff voluntarily undertake to talk in the evenings at parent-teacher association meetings or to similar organisations and, of course, take every opportunity at the chairside of teaching correct dietary habits and oral hygiene. Pierre the Clown, a well-known television personality, spent a week during September visiting all schools in the Cannock and Hednesford areas giving fifteen-minute talks on care of the teeth. These humorous occasions were greatly enjoyed by 5,000 children and carried over the message of dental health in a novel and happy way, reinforced at the end of each talk by the children each receiving an apple, a painting book and a badge.

The theme of the Health Department's exhibition, which gained first prize in its class at the two-day Staffordshire County Show in May, was "Dental Health". The exhibits included old and up-to-date dental surgeries, non-stop film shows, a working model railway and poster displays which were seen by an estimated 10,000 people. "Apple Annie", sponsored by the Cape Apple Producers Association, also attended throughout the show, talking to children on dental care and giving each child an apple.

Special Investigations

An investigation into the state of the teeth of five-year-old children who had just entered school was carried out by some fifteen dental officers during the Winter Term. The survey, organised and collated by the County Dental Officer, comprised random sample examinations for the number of decayed, missing and filled teeth in five-year-old boys and girls in all areas of Staffordshire. The detailed tabulated results are shown on pages 52 to 53. Owing to possibly differing assessments by individual inspecting dental officers it is felt that valid comparisons cannot be drawn between one area and another but the overall picture shown by this survey about the state of fiveyear-old children's teeth is depressing. Boys' teeth at this age tend to be worse than those of the girls, the boys averaging 5.2 decayed, missing and filled teeth, the girls 4.8. There would seem to be no significant difference between teeth in the upper and lower jaws. The enormous amount of untreated dental decay in children of this young age is once again demonstrated and perhaps most clearly of all, the extremely small number of children with perfect dentitions, only 74 out of 476 boys examined (15.5%) and 62 out of 436 girls examined (14.2%).

Comparison with similar investigations carried out in 1961 and 1962 in Staffordshire shows that no real improvement has taken place during recent years and that the girls' teeth are in fact a little worse than in 1962.

It is interesting to note, from comparable statistics obtained in Staffordshire, that the number of five-year-old children possessing perfect dentitions in 1967 is lower than at any time since the end of the war. In 1946 no less than 64% of five-year-old school entrants had perfect teeth, the result of having received all their lives a scientifically balanced diet together with severe limitation, due to rationing, of sweets and other refined carbohydrates. The gradual relaxation of rationing and an increasing availablility of luxury foodstuffs is reflected in the declining percentage of five-year-old children with perfect teeth.

DENTAL INSPECTION OF SCHOOL ENTRANTS (Aged 5 years)

Boys

Winter Term 1967

Total d.m.f.
filled jaw decayea
79
68
6 83 75
7 87 61
93
 08'i
97
55
108
126 1,246 899

DENTAL INSPECTION OF SCHOOL ENTRANTS (Aged 5 years)

Winter Term 1967

Table 31.

Girls

)			1
Total d.m.f.	child	1.00.00.00.00.00.00.00.00.00.00.00.00.00	8.4
d.m.f. per child	upper jaw	940668444 940668444 94066444 94066444 94066444	2.3
d.m.f. per child	jaw	6.6.2.6.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	2.5
% age of children with no	defects	2000 2000 2000 2000 2000 2000 2000 200	14.1
No. of children with no	defects	71-877E81 8E99774E	62
Total d.m.f.	jaws	152 162 133 133 153 153 153 153 153 153 153 153	2,096
Total d.m.f.	upper jaw	106 106 106 106 106 107 108 108 108 108 108 108 108 108 108 108	1,008
	filled	00-00410 047-464-	73
Upper Jaw	missing	072227	153
0	decayed	3658 333662 41133968 33468 3368 3368 3368 3368 3368 3368 3	782
Total d.m.f.	jaw	114 862 873 108 882 108 862 874 874 874 875 875 875 875 875 875 875 875 875 875	1,088
	filled	20014448 E9441E12	66
Lower Jaw	missing	464827748 204825 204825 204825 207	278
L	decayed	88488888888888888888888888888888888888	711
19dmu b9nima		22222222 222222222 22222222 222222222 2222	440
AREA		Biddulph Kidsgrove Leek Cheadle Uttoxeter Stafford, central Stafford, south Codsall Essington/ Shareshill Wombourne Lichfield Tamworth/Fazeley Brownhills Shelfield Aldridge	Totals

This survey proves, if indeed proof were needed, the need for improvement in the dental health of the young children in this country. With the dental manpower at present available it is just not possible to treat such a vast amount of dental disease even if the financial cost of so doing could be afforded by the tax- and rate-payers. Prevention is obviously the only practical policy and this must be pursued by continuous dental health education and public health measures such as fluoridation of the water supplies. Such measures have been proved to cut the dental decay rate by 50% over a number of years and one wonders how much longer the nation can afford not to fluoridate water supplies and imperil the health and happiness of its young citizens.

Every opportunity has been taken to bring to the notice of District Councils and the population at large, the dental advantages accruing from fluoridating the water supplies and by the end of the year it seemed likely that progress was at last being made in fluoridating the Leek U.D.C.'s water supplies. It is hoped that when the improvements in dental health from fluoridation come to be evalued from Leek and from the City of Birmingham, which has had fluoridated water for more than two years, there will be an accelerated demand for fluoridation from other areas.

General Remarks

A one-day visit of inspection of the dental services was made in September by one of the dental officers on the staff of the Department of Education and Science. Such visits, carried out approximately once every two years, afford a most useful opportunity for liaison and the discussion of problems.

The Annual Conference of the British Dental Association was held at the University of Birmingham in July and, owing to its proximity, the County Dental Officer and three other dental officers were able to attend on a daily basis. In conjunction with Warwickshire County Council and Woverhampton County Borough Council, this authority staged an exhibition at the conference on the general theme of Local Authority Dental Services and Dental Health Education. Liaison with the hospitals and general practitioner dental services was maintained by the County Dental Officer's membership of the Local Dental Committee.

Table 32.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY DURING 1967

1. Attendances and Treatment:

		Ages	Ages	Ages 15	
		5 to 9		and over	Total
	First Visit	9,051	6,267		16,180
	Subsequent visits	11,689	13,586	· ·	27,669
	Total visits	20,740	19,853	3,256	43,849
	Additional courses of	5.65	470	7.4	1 116
	treatment commenced	565	478	74	1,117
	Fillings in permanent teeth	7,977	16,919	3,236	28,123
	Fillings in deciduous	1,911	10,919	3,230	20,123
	teeth	7,684	465	-	8,149
	Permanent teeth filled	6,471	14,805	2,880	24,156
	Deciduous teeth filled	6,920	416		7,336
	Permanent teeth ex-	0,> 20			,,000
	tracted	952	3,080	528	4,560
	Deciduous teeth ex-				ŕ
	tracted	12,237	2,809		15,046
	General anasthetics	3,898	1,398	106	5,402
	Emergencies	1,511	722	97	2,330
	Number of Pupils X-ray	ed			724
	Prophylaxis				5,304
-2	Teeth otherwise conserv	ed			3,650
•	Number of teeth root fil	lled			64
	Inlays				7
	Crowns		• •	• • • •	44
	Courses of treatment co	mpleted	• •	• •	14,062
2.	Orthodontics				
	Cases remaining from p	revious	year		781
	New cases commenced of				42
	Cases completed during	•			285
	*	•	• •	• • • •	71
	Cases discontinued duri		ا ، ،	• •	
	No. of removable applia		lea		266
	No. of fixed appliances			• •	5
	Pupils referred to Hospi	ital Cons	sultant		13

3. Prosthetics

٥,	1 Tostilettes			15 and	
		5 to 9	10 to 14	over	Total
	Pupils supplied with	5 10 5	10 10 14	OVCI	Total
	F.U. or F.L. (first				
	time)	4	3	2	9
	Pupils supplied with		-		
	other dentures (first				
	time)	2	41	46	89
	Number of dentures				
	supplied	7	52	68	127
	supplied	•			12,
4.	Anaesthetics				
••	General Anaesthetics	administ	ared by	Dental	
	Officers	aummisu	cred by	Delital	901
	Officers	• •	••	• •	701
5.	Inspections				
	(a) First Inspection at so	chool. N	umber of	Pupils	35,187
	(b) First Inspection at cl	linic. Nu	mber of P	upils	11,463
	Number of $(a) + (b)$	found to	require tre	atment	27,155
	Number of $(a) + (b)$	offered tre	eatment		24,788
	(c) Pupils re-inspected a	t school o	clinic		3,645
	Number of (c) found	l to requi	re treatme	nt	1,810
6.	Sessions				
	Sessions devoted to trea	tment			7,985
	Sessions devoted to insp				382
	Sessions devoted to Der		h Education	on	693

Table 33. Number of suspected cases of Infectious and Contagious Diseases notified by Head Teachers

Totals	2,829 2,829 2,829 2,922 2,165 1,676 1,676 4 4 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	7,834
Dec.	20 20 20 13 18 18 18	190
Nov.	24 10 24 38 38 38 38 10 11 11 11 11 11 11 11 11 11 11 11 11	210
Oct.	816 144 16 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	200
Sept.	411 33 33 17 38 8 1 1 1 1 1 1 4 1 9 1	125
Aug.		!
July	30 866 37 140 99 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	416
June	212 47 47 233 425 127 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	856
May	27 345 100 29 319 223 11 1 1 1 1 1	1,086
April	170 170 34 120 88 88 11 1 1	453
Mar.	13 486 477 35 476 292 1	1,357
Feb.	30 884 47 51 497 225 1 1 1 1 1 8 30	1,793
Jan.	26 32 32 320 320 15 15	1,148
	:::::::::::::::::::::::::::::::::::::::	•
Disease	Scarlet Fever Measles Rubella Whooping Cough Mumps Chicken Pox Influenza Impetigo Scabies Ringworm Conjunctivitis Tonsillitis Fever Enteritis Hepatitis Dysentery Diarrhoea and Sickness Food Poisoning	TOTALS

INFECTIOUS AND CONTAGIOUS DISEASES

During the year the Director of the Public Health Laboratory Service, as always, was most helpful and co-operative in investigating outbreaks of infectious disease in schools. One particular outbreak is worth mentioning.

One day in November a telephone message was received from the Head of a primary school that 24 children and 8 teaching and school meals staff had been ill with diarrhoea the previous night. The teaching and school meals staff had been able to resume their duties but the 24 children were still absent. Investigations were immediately put in hand by the County Health Department and since the meals at the primary school were supplied in containers from the kitchen of a large Grammar school some distance away, investigations were carried out there simultaneously. Sample meals of those served at the Primary and at the Grammar schools were taken to the Medical Research Laboratory at Stafford for bacteriological examination.

It was found that there had also been illness among the teaching and kitchen staff and pupils at the Grammar school. Of the 10 kitchen staff, 4 had reported illness with abdominal pains and diarrhoea overnight but were back at work the next day. As a precautionary measure all the kitchen staff who had reported being ill were suspended from duty together with the 3 meals assistants at the Primary school who had also been ill.

Working in close co-operation with the Stafford Borough Health Department, arrangements were made for samples of faeces to be collected from all the kitchen staff at the Grammar school and all the school meals assistants at the Primary school. Samples were also taken from a number of children who had been ill at both schools and from some of the teaching staff.

Following examination of the sample meals, the cause of the outbreak was reported by the Public Health Laboratory to be due to clostridium welchii and these bacteria were also isolated from the specimens from the school meals and teaching staffs and children.

Some 40 children at the Grammar school were affected together with 24 from the Primary school. The illness followed the typical pattern of this particular type of infection and the children and staff very quickly recovered and were back at school within a day or two.

The actual source of the infection was not traced but the vehicle was, in all probability, the meat, in this case brisket, which was boiled and pressed one day and eaten cold the next day.

58

Vaccination against Smallpox

Table 34. No. of children found to have been vaccinated when examined at the periodical medical inspection

Age	No.	No.	No. unvac-		centage accinated
Group	examined	vaccinated	cinated	1966	1967
Entrants	11,152	6,364	4,788	45.4	42.3
2nd Age Group	3,873	1,903	1,970	53.2	50.9
3rd Age Group	7,653	3,376	4,277	63.4	55.9
Other Periodic Inspections	2,921	1,535	1,386	49.7	47.4
Totals	25,599	13,178	12,421	53.7	48.5

Immunisation

Table 35. No. of children immunised during 1967

Type of Vaccine			Children aged between 5 and 16 years
Quadruple D.T.P.P.	 	 	1
Triple D.T.P	 	 	746
Diphtheria/Pertussis	 	 	1 00 1
Diphtheria/Tetanus	 	 	1,827
Diphtheria	 	 	59

No. of Children who had re-inforcing doses during 1967

Quadruple D.T.P.P. Triple D.T.P. Diphtheria/Pertussis Diphtheria/Tetanus Diphtheria					1,340 4 6,485 809
---	--	--	--	--	----------------------------

Table 36. Summary of Reports received from Chest Physicians

Number of children (aged 5-15 years) on Dispensary	
registers at the end of 1966	77
Number of new cases during the year	14
Number of deaths	
Number transferred to other Authorities	3
Number discharged having recovered	8
Number becoming 15 years old	4
Number of children on registers at end of the year 1967	76

(a)	Puli	monary		under Treatment during the year (i.e. at some time during the year)
	1.	Primary Hilar lesions:		
		(a) Simple		48
		(b) Complicated		3
	2.	Primary Pleural Effusion		3
	3.	Miliary		2
	4.	Adult Type		_ 0.0
(<i>b</i>)	Non	n-Pulmonary		
	1.	Lymph Glands:		
		(a) Cervical		3
		(b) Others	• •	and the same of th
	2.	Bones and Joints		
	3.	Meningitis		1
	4.	Others	• •	4

HEALTH EDUCATION

Once again the post of Deputy Health Education Officer became vacant and it was five months before a replacement was found. An Assistant Health Education Officer also resigned, but another joined within a month of the resignation of the former. The establishment of 8 whole-time officers was, therefore, the equivalent of 2.4 whole-time officers short throughout the year as compared to a figure of 2.8 in 1966. However, the amount of work undertaken increased. This was due in part to a lesser need for training, a greater participation in and more emphasis on "Learning to Live" courses with integration of some of the subjects such as personal health and hygiene.

A great deal is heard today about the liberal attitude of society, the outspokenness of the Press, television, radio and books on aspects of life which a few years ago it was considered improper to discuss openly. Many people still feel that if they pretend that problems do not exist this will cause them to disappear. However, as more children receive a higher standard of education subjects such as promisuity, the pill, venereal disease, drugs, etc. will receive more attention and be discussed more widely. It is the duty of health educators to ensure that the young have constructive guidance in these matters and a chance to discuss with responsible people the consequences of irrational actions. In this way youngsters should grow into adults, healthy in body and mind and able to take their place in society with a knowledge of the responsibility they have towards each other. Only in this way can we hope to combat some of the immature attitudes that abound today on such matters as sex and drugs with the accompanying unhappiness and sometimes death which can result from active participation.

It was reported in the last Annual Report that an experimental course had been carried out for children in the 10+ group. As a result of the knowledge gained a syllabus covering six teaching periods called "Health and Development" has been introduced into junior schools. Eight schools accepted this course during the year but the limited availability of staff prevented more schools from taking the course.

Many schools are anxious to carry out health education with their own staff and where suitable teachers are available this is to be welcomed. Every encouragement is given to those interested by providing advice, visual aids and any other assistance required. This relieves the pressure on the Health Education staff and enables them to concentrate in areas where little or no health education would be carried out.

Many schools have a social studies period and many requests are received to give lectures which fit into this scheme. One school carried out, in conjunction with the Health Education Officer, a project on smoking. The pupils made a smoking machine and extracted tar from cigarette tobacco and then attempted to analyse the tar. They also carried out a survey among all the pupils in the school regarding their smoking habits and produced some interesting information in the form of graphs. This group participation is a very effective way of producing a behavioural change in attitude and resulted in many pupils stating that they would not smoke in the future. This project was a useful indication how a school lesson and health education can be combined as both the science and mathematics teachers were involved.

As in past years acknowledgment must be given to those outside the Health Education staff who assisted in school health education. This in the main has come from dental auxiliaries and health visitors.

Table 37. Lectures

Subject		No. of Pupils	No. of Lectures
Dental Health	 	7,092 (6,500)*	138 (17)*
Smoking	 	30	3
Home Safety	 	106	3
Personal Health	 	90	4
Other	 	75	2

^{*} Details of special campaign.

Courses

	No. of	No. of	No. of
Subject	Pupils	Lectures	Courses
Learning to live	 4,396	923	155
Health & development	 479	96	16
Mothercraft	 46	36	2
Female hygiene	 144	6	3

PART V—GENERAL HEALTH

Table 38. Classification of the Physical Condition of Pupils inspected during the year at periodical medical inspections

			Physical Condition of Pupils Inspected				
Age Groups Inspected (By years of birth)		No. of Pupils	Satisf	actory	Unsatisfactory		
(1)		,	Inspected -	No. (3)	% of Col. 2 (4)	<i>No.</i> (5)	% of Col. 2 (6)
1961 1960 1959 1958 1957 1956 1955 1953			299 4,882 5,971 951 353 189 125 811 3,062 1,303 1,109 6,544	299 4,870 5,946 945 353 187 125 810 3,048 1,300 1,109 6,517	100 99.8 99.6 99.4 100 98.9 100 99.9 99.5 99.8 100 99.6	$ \begin{array}{r} $	0.2 0.4 0.6
TOTALS			25,599	25,509	99.6	90	0.4

This year the percentage of children classified at Routine Medical Inspections as being in an unsatisfactory state of health increased from 0.3% to 0.4%. The lowest figure of this nature ever recorded was 23 in 1959 or 0.07%. A classification of this nature is naturally subject to the opinions of the individual medical officers but the position throughout the County is, in general, satisfactory.

Table 39. Milk in Schools Scheme

Type of Milk Maintained Schools:		No. of Schools supplied	No. of pupils
Pasteurised	 24	452	72,865
Untreated	 4	5	95
	28	457	72,960
Non-Maintained Schools: Pasteurised	 9	23	2,656

Table 40. Milk for Handicapped Pupils unable to attend school

No. of old applications re-	newed		28
No. of new applications g	ranted		15
No. of children who cea	sed to receive	milk	
during the year			12

SCHOOL MEALS SERVICE

The following report is based upon information which the Director of Education has kindly supplied:—

There have been no marked changes in the service during the last twelve months, except for general expansion in order to provide the increased number of meals required. Twentythree new kitchens have opened during the year, which have helped to relieve overloading in some of the kitchens, though accommodation both for cooking and dining purposes still presents one of the largest problems of the service.

Nutritional Standards

No change has taken place in the general quantities of food supplied, but several Senior Schools are now offered a limited choice in the menus. The introduction of coffee and cakes (home-made), occasionally has been popular and these changes appear to reduce the amount of plate waste.

Staffing and Training

It has been possible to bring the Organising staff up to strength during the year, including the appointment of a Training Organiser. Kitchen staff continue to change quickly, but there has been no serious shortage.

All Cook Supervisors and Cooks-in-Charge have received a five-week course of training before taking up new appointments. Courses have also taken place for Assistant Cooks, but there are many appointed who have yet to attend a training course. It is expected that a second training kitchen will be opened in Leek during 1968 and this should help to relieve the situation.

New Kitchens Opened

(a) In new schools (County Area):

Biddulph, English Martyrs' R.C. (A) Primary School Forsbrook C.E. (C) Primary School Meir Heath Primary School

Stafford, The Walton Comprehensive School
Stafford, Sandyford Nursery School
Stretton, Burton Junior School
Tamworth, Rene Road Infants' School
Tamworth, St. Elizabeth's R.C. (A) Primary School
Tamworth, Ashby Road Primary School
Uttoxeter, Tynsel Parkes Infants' School
Werrington, Saltway Infants' School
Wilnecote Infants' School
Whittington, The Dyott J.M. & I. School

(b) In existing schools (County Area):

Colton, St. Mary's C.E. (A) Primary School Glascote, Junior School Kidsgrove, Wade Memorial C.E. (A) Infants' School Penkridge, St. Michael's C.E. (A) Junior School Tittensor C.E. (C) Primary School Weston-under-Lizard J.M. & I. C.E. (C) School (Kitchen reopened)

(c) In existing schools (Cannock Chase Division):

Cannock, John Wood C.E. (A) Infants' School Chasetown Primary School Chase Terrace Comprehensive School (2nd kitchen) Tynings Secondary School

Major Extensions to Existing Kitchens

Barlaston C.E. (C) Primary School

Meals on Wheels

An average of 370 meals have been supplied weekly from the following school kitchens:—

Ashley Secondary
Betley C.E. (C) Primary
Biddulph Central Kitchen
Codsall Secondary
Kinver, Edgecliff Secondary
Kidsgrove, Clough Hall Comprehensive

Schools where there is no School Meals provision

County Area Hopwas, The Thomas Barnes Primary School

*Cannock Chase Brownhills, Holy Trinity C.E. (C)
Division Infants' School

^{*} Meals will be supplied here early in 1968 when the kitchen is completed.

Table 41.

	1967	1966
No. of children present	91,058	88,503
No. of meals served to children daily	65,516	63,062
No. of schools provided	453	454
No. of schools not provided	2	3
No. of kitchens	286	277

PHYSICAL EDUCATION

The following report is based upon information which the Director of Education has kindly supplied.

Primary Schools

The work of teachers to promote the full growth and development of children has been most effective in those schools which have halls equipped with gymnasia apparatus. In small rural schools, the physical education lessons were conducted only when outdoor weather conditions were suitable. In spite of the limitations, however, the use of modern methods of teaching educational gymnastics based on Laban principles of movement is showing good results in improved physique, posture and range of movement in all planes and gymnastic skills.

The impact of courses conducted for teachers in Educational Dance was evident in the amount of this work being carried out, particularly in infant schools. The improved interpretation of musical themes in movement was evident in some schools.

Those schools with playing fields made full use of them when weather and conditions were suitable, to coach games such as rounders, stoolball, cricket, football and hockey with rules amended to suit their skill and age. Most schools coached simple athletic skills and held sports days which were often well attended by parents. In areas where there are swimming baths the top classes of primary schools received instruction and many children learned to swim. Parent-Teacher Associations have shewn great interest in swimming and a number are raising funds to help provide baths at certain schools.

The move towards some specialisation by certain members of school staffs in the teaching of physical education has continued. This development in the main has been beneficial—especially in the teaching of games, swimming and dance.

Secondary Schools

In large schools the number of men specialist teachers of physical education was adequate, but in smaller ones the position was still unsatisfactory. Fully qualified women teachers were scarce and a few schools have not had a woman teacher of physical eduction during the year.

There is an equipped hall or gymnasium in every secondary school. The equipment at each has been inspected and maintained in good condition. At Tynings Secondary School, Aldridge, a sports hall has been built and this provides a large covered area for playing many games no matter what the weather conditions.

Gymnastics were included in all programmes and a good standard was obtained particularly in olympic-type work. Trampolining is still popular and there was an increasing interest in this sport in girls' classes.

In boys' winter games, rugby was preferred to association football in some schools while others played both games. Hockey is also enjoyed where pitches are available. Girls' games include hockey, netball and lacrosse. A successful netball tournament was held in Stafford. League and friendly games were played throughout the winter with schools in the vicinity. Some financial assistance with travelling expenses would help schools in remote areas to obtain stronger opposition and possibly improve their standard of play.

Cross country running increased and inter-schools and area races were arranged.

In the summer term more cricket was played particularly by Grammar and Comprehensive Schools. Artificial practice wickets have been provided on most playing fields. Generally athletics was the main summer sport and standards in this have been maintained. Field events including pole vaulting were popular and the facilities provided on all playing fields for these were well used. Schools held their own athletic sports and many inter-school and area meetings took place.

The interest in the coaching of golf has increased and more schools played a pitching and putting type of game on their own fields.

Facilities

During the year county-standard apparatus was installed in new halls at fifteen primary schools and gymnasia at two secondary schools. One sports hall was also equipped with suitable games nets and goals. Open air swimming pools were built at one primary school and two secondary schools and indoor pools provided at two secondary schools. To provide temporary indoor facilities for small primary schools twelve additional village halls were used during the year.

Swimming Instruction

The opening in July of a public swimming pool at Cheadle has greatly improved the facilities for teaching swimming in the north-east part of the county but there is still an urgent need for baths in the Biddulph and Kidsgrove areas and Cannock Chase Division. An open air pool at Waterhouses Secondary School came into use and thanks to the kindly cooperation and initiative of the Headmaster swimming instruction was also made possible for fourteen primary schools in the vicinity. The pool has also enabled parents and other adults in the district to have a late opportunity of learning to swim.

Nineteen public baths and twenty school baths were used for instruction during the summer term and thirteen public and eight school baths during the winter and spring terms.

The following County and National Awards were gained by boys and girls:—

County beginners' badges	4,281
County cloth badges and certificates	1,015
Survival Awards of the Amateur Swim-	
ming Association	534 Bronze
	161 Silver
	101 Gold
Awards of the Royal Life Saving	
Association	234

To encourage a knowledge of methods of artificial resuscitation, sets of the Cheshire Wilson training sets were distributed for use in schools.

Camping and Outdoor Activities

Centres at Shugborough Park, where there are four sites, Coven, Cotwalton, Chasewater, Port Dinorwic and Hales Hall were fully used throughout the summer term. Owing to restrictions due to the prevalence of foot and mouth cattle disease two Adventure courses only were held at camps in the county during the autumn term and three at Port Dinorwic in Caernarvonshire. Hales Hall centre was also open during the spring term.

During the holidays camp wardens conducted a girls' canoe cruise on the River Wye, climbing expeditions in the Lake District and North Wales and sea canoeing and climbing in the Island of Arran. At Port Dinorwic there were advanced sailing and climbing courses.

The scope of outdoor activities was widened to include three 10-day courses for boys and girls in skiing in Scotland during the spring term. The M6 motorway has made the skislopes at Aviemore and Glen Shee more accessible. By using the camp Land Rover vehicles and living in Youth Hostels in Braemar the cost per head was reduced considerably. All learned to ski and sixty-four gained the Bronze Award of the ski school.

Two pony trekking courses were held at Port Dinorwic and the boys and girls found them more tiring than expected but interesting and enjoyable particularly as lightweight camping was included.

A total of 4,842 boys and girls attended weekly and ten-day adventure courses during the year.

Local courses for men and women teachers were held in dance, educational gymnastics, olympic gymnastics, swimming and badminton at ten centres with an attendance of 239 and three residential courses at Madeley College of Education, Chasewater and Port Dinorwic sailing and camping centres with an enrolment of seventy-two teachers.

Clothing and footwear for physical education were provided on loan to schools for use by pupils unable to provide their own regularly.

Three children have undergone remedial exercises for minor postural defects under the supervision of trained physical education teachers.

To provide opportunities for outstanding players and athletes to attain selection for Area and National teams many Schools' County Associations have continued their important work and the county Schools' Sports Council has given them appreciable help financially. The large volume of voluntary work by teachers in arranging and conducting local leagues, tournaments, regattas, swimming, sports and trials has provided boys and girls with many hours of enjoyable healthy activity to supplement that normally provided in school.

Children Neglected or Ill-treated in their own Homes

The Local Committees which were set up in accordance with the provision of the Joint Circular of the 31st July, 1950,

of the Home Office, Ministry of Health and Ministry of Education are continuing to carry out valuable work in regard to these children. During the year the names of three children were referred from the School Health Service to the Local Co-ordinating Officers.

UNCLEANLINESS

Table 42. Infestation with Vermin

Number of individual examinations of pup by nurses and authorised persons	ils in so	chools		162,935
Number of pupils found to be infested				2,528
Number of pupils for whom cleansing noticities issued. S.54(2) Education Act, 1944	ces wer	e		
Number of pupils for whom cleansing orders issued. S.54(3) Education Act, 1944	ers were			
Number of Sacker Combs sold				30
Table 43. Analysis of Infestation				
Number of children with infestation of:				
Body				9
Head Lice			• •	187
Head Lice			• •	2,332

Each term hygiene inspections are carried out in schools when the children's hair is examined by the school nurses. Usually excellent co-operation is given by the parents who sometimes request that cleansing should be carried out. Unfortunately there are still some children who present recurring problem of repeated infestation of their heads and need to be kept under continual surveillance by the school nurses.

When parents fail to keep their child's hair in a satisfactory state the Local Education Authority is empowered, after examination by an authorised person, to serve notice upon the parent or guardian of the infested child, requiring cleansing to be carried out. This is to be followed by attendance at a

cleansing centre so that an examination may be made. If, despite the notice to the parents the state of the child's hair is still unsatisfactory the school nurse cleanses it and a school medical officer issues a certificate afterwards to the effect that the child's hair is clean.

Should reinfestation quickly recur the Local Education Authority may issue a compulsory cleansing order under which an authorised person is empowered to remove an infested child to a suitable place for cleansing to be carried out. The parent or guardian receives a copy of the order and the authorised person is informed that cleansing is necessary. After compulsory cleansing a certificate is issued by a school medical officer to show that cleansing has been satisfactorily carried out.

Foot Inspections

Foot inspections have always been a regular feature of the work of the nurses in the School Health Service and it is estimated that 545 half-day sessions were devoted to the work during the year.

Table 44	Table 44. Foot Inspections			TYPE OF	TYPE OF SCHOOL			Total
		Nursery	Infant	Junior	Secondary	Grammar	Comprehensive	Schools
Number of Unsatisfacto	Number of children with Unsatisfactory Footwear	3	278	1,376	969	9	122	2,381
Number of children w Satisfactory Footwear	Number of children with Satisfactory Footwear	47	8,679	35,842	10,203	675	838	56,284
Total number School Nurse	Total number of children seen by School Nurse	90	8,957	37,218	10,799	681	096	58,665
Number of	Number of children with unclean feet	2	229	1,053	456	17	24	1,781
Number of children unsatisfactory socks	Number of children with	9	7.1	342	83	1	2	504
Foot Deformities	mities		81	231	160	1	31	504
Number of	Number of children with corns	6	42	244	108	1	48	451
Foot Infections	suo		28	457	324		48	283
Number of	Number of children referred to S.M.O.s		18	208	107	1		333

Table No. 45

		Nursery	Infant	Junior	Secondary	Grammar	Comprehensive	Totals
Showing the percentage of children with:—								
Unsatisfactory footwear		0.9	3.1	3.7	5.5	6.0	12.7	4.0
Satisfactory footwear		0.46	6.96	96.3	94.5	99.1	87.3	0.96
Unsatisfactory socks		12.0	8.0	6.0	8.0		0.2	8.0
Unclean feet		4.0	2.6	2.3	4.2	2.5	2.5	3.0
Foot deformities		2.0	6.0	9.0	1.5	Miles Property Control of the Contro	3.2	8.0
Corns		18.0	0.5	0.7	1.0	1	5.0	8.0
Foot infections	_		9.0	1.2	3.0		5.0	1.5
	-	-						

Enuresis Alarms

Towards the end of 1957 it was decided to provide a number of nocturnal enuresis alarms under the nursing comfort provisions of Section 28 of the National Health Service Act, 1946 and since then there has been a regular demand for these. A report is also included in the annual report of the County Medical Officer of Health, but a brief summary of results is appended in respect of the children of school age who received the treatment during the year.

Table 46.

No. of alarms in use as at 31st Dec	1	22
	Boys	Girls
Waiting list as at 31st December	55	25
No. of children cured in 1967	92	55
No. of children improved in 1967	25	13
No. of children relapsed after treatment but much improved	9	1
No. of children relapsed after treatment and awaiting further trial	5	2
Failures		
Too nervous	10	2
Heavy sleepers	9	4
Unco-operative mother	10	2

No of alarma in use on at 21st Dog

The proportion of cases assisted by this device gives grounds for satisfaction, for treatment in the past has often proved prolonged and difficult.

It is routine procedure to follow up cases twelve months after the trial period with an alarm ended and the criterion of cure is 12 months free from relapse.

Four special schools, Ashley, Needwood, Standon Bowers and Walton Hall have alarms and excellent results have been reported.

SCHOOL PREMISES

Inspection of School Premises

The following table shows the kinds of defects reported by School Medical Officers following their visits to schools during the year. Adverse reports were made upon 165 of the 413 schools which were visited. There were 66 schools with more than one defect. Some of the defects were corrected in the same calendar year and of course other defects, reported prior to 1967, were also rectified.

Although School Medical Officers are required to inspect school premises and to report defects found, unless health is endangered, it does not necessarily follow that it is possible in all cases to have such defects rectified.

Table 47.

Defective Conditions	N		fects reported in 1966
Sanitary		56	64
Kitchens		39	37
Heating		24	15
Supply of Drinking Water		14	9
Lighting		18	9
Cloakrooms		13	14
Dining Rooms		3	3
Ventilation		18	6
Washing Facilities		7	13
Kitchen Wash-ups		6	3
Playgrounds		18	16
General Environment		11	12
Miscellaneous		40	38
Total Defects reported		267	239

WATER SUPPLIES

During the year the County Health Inspectorate regularly sampled school water supplies for purity and, where applicable, the efficiency of the chlorination equipment and technique.

A total of 3 samples were taken for chemical analysis, all of which were satisfactory.

A total of 41 samples were taken for bacteriological examination, of which

36 were satisfactory, and 5 were unsatisfactory.*

(*This figure includes samples taken from known or suspected polluted supplies as a check against the efficiency of sterilisation measures.)

The situation at the end of the year was as follows:—

- 4 schools were treating the water with chlorine tablets, filters or chlorination plants.
- 3 schools were receiving private mains water.
- 2 schools were receiving public mains water by container.
- 1 school was receiving untreated water from its own borehole.
- 1 school had been connected to a public mains supply.

SWIMMING BATHS

All school swimming baths were inspected by the County Health Inspectorate at least once per term as a matter of routine and tests were carried out on the spot to determine both the chlorine and pH content of the water. Advice on the operation of the bath was given to caretakers as and when necessary and special attention was paid to new baths or in cases where difficulties were experienced.

A total of 54 samples were taken for bacteriological examination, of which

52 were satisfactory, and 2 were unsatisfactory.

A total of 17 samples were taken for chemical analysis.

16 were satisfactory, and 1 was unsatisfactory.

Table 48. Handicapped Pupils

fome Tuition	Girls					1	1.				1	1	
At Home without Tuition	Boys	1	1			1							
Number having Home Tuition Including those or admission to Special Schools	Girls	1		-		3	6	-	S	13		31	84
Number having Home Tuition Including those for admission to Special Schools	Boys					10	15		10	18		53	
Number in or having special provision at an Ordinary School	Girls		7		25	254	156	32	150	186	160	596	78
Number in or having special provision at an Ordinary School	Boys		_		39	309	320	47	303	255	439	1,713	2,678
Number awaiting admission to Special Schools (as recorded on form 21M)	Girls	4	en			7	49	e	7	7		80	185
Number awaiting admission to Special Schools (as recorded on form 21M)	Boys	8		1	_	9	77	_	9	6	1	105	
placed ecial in 1967	Girls			7	10	9	31		4	13		99	186
Number placed in Special Schools in 1967	Boys			8	∞	12	61	-	19	15		120	
ers in Schools rded on 21M)	Girls	10	12	23	23	17	142	3	8	50		283	781
Numbers in Special Schools (as recorded on from 21M)	Boys	∞	14	22	30	28	305	7	30	58	-	498	78
Total known handicapped Pupils	Girls	14	17	19	19	293	432	40	171	261	160	1,474	121
Total kno handicapp Pupils	Boys	13	15	26	89	369	846	50	349	350	440	2,547	4,021
	608340	Blind	Partially Sighted	Deaf	Partially Hearing	Delicate	Educationally Sub-normal	Epileptic	Maladjusted	Physically handicapped	Speech Defects	TOTALS	GRAND TOTALS

N.B.—Pupils attending Hospital Special Schools are only included in this table in the first column.

Only pupils from the Excepted District of Newcastle-under-Lyme who are in, or awaiting admission to residential special schools, are included.

During the year six new school swimming baths were opened.

The position at the year end was, therefore, as follows:—

- 10 schools had open air (heated) baths equipped with purification plants.
 - 2 schools had fill-and-empty type baths which are hand chlorinated.
- 11 schools had covered baths equipped with purification plants.

The schools which have their own swimming baths comprise the following:—

- 12 Secondary Schools.
 - 4 Primary Schools.
 - 6 Special Schools.
 - 1 Training College.

HANDICAPPED PUPILS

Table 48 includes children who do not come within the categories of handicapped children as defined in the Handicapped Pupils and Special School Regulations, 1959. These suffer from a milder type of handicap which does not prevent their attendance at the ordinary school. They are, however, kept under constant supervision to ensure they are properly placed and so that the necessary action can be taken immediately some special educational provision is necessary.

On leaving school the medical records for a handicapped child are sent to the child's General Practitioner whenever it is felt that the handicap is substantial and is likely to continue into adult life.

CONVALESCENCE AND DEBILITATED CHILDREN

662 children suffering from debility and other defects which did not warrant their admission to open-air schools were kept under clinical observation and 78 children (38 boys and 40 girls) were admitted to the Lanthorne Convalescent Home for short periods during the year.

Parents value this service, for a period of convalescence has often substantially assisted their children to recover after illness or operation. Liaison is maintained with each child's family doctor before the child is sent for convalescence.

Home tuition

Tuition is provided at home in accordance with Section 56 of the Education Act, 1944 for those children who are so severely handicapped that they cannot attend at either an ordinary, or special school, and also for those who cannot attend an ordinary school whilst a vacancy is being sought for them in a special school. This form of education is decided upon after examination by a School Medical Officer.

127 children had tuition at home during the year and 84 children were receiving tuition at the end of the year.

For 66 of these children tuition at home was the best possible provision at the end of the year but the other 18 children were having home tuition as a temporary measure whilst awaiting a vacancy at a special school.

HOSPITAL SPECIAL SCHOOLS

Table 49.

At the end of the year there were 19 Staffordshire children in Hospital Special Schools.

Standon Hall Orth	nopaedic	Hosp	ital,	Nr.	
Stafford				• •	14
Biddulph Grange	Orthopa	edic	Hospi	tal,	
Special School					5
					19

Table 50. Classification of children referred to the Mental Health Authority

Classification	No. of Children
Section 57(4) Education Act, 1944	7
Four boys and three girls were referred under S	Section 57(4).

Further Education of Handicapped Young Persons

The following report is based upon information which the Director of Education has kindly supplied:—

In the year 1967 disabled students and blind students were maintained by the Authority in recognised Colleges providing vocational courses. Fifteen handicapped persons were provided with tuition in their own homes in subjects including shorthand, typing, amateur radio, reading and mathematics. In addition a remedial class was offered on an experimental basis by the Authority at the Stafford College of Further Education, with an enrolment of 6 students.

Classes were also conducted at St. Margaret's Hospital, Great Barr, as part of the Authority's Evening Institute programme and during the year some 450 students attended classes. Classes under the jurisdiction of the Principal of Stafford College of Art were held at St. George's Hospital, and members of Lichfield Art School conducted classes at St. Matthew's Hospital, Burntwood.

STAFFORDSHIRE'S SPECIAL SCHOOLS AND CLASSES

FOR EDUCATIONALLY SUB-NORMAL PUPILS

I OK EDEE!	HOLLES OCE HORANIE & CLIEB	
Residential		Accommodation
Boys:	Loxley Hall Age Range 8-16 years.	80 boys
	Standon Bowers Age Range 10½-16 years.	60 boys
Girls:	Walton Hall Age Range 8-16 years.	48 girls
Day		Accommodation
Mixed:	William Baxter, Cheslyn Hay Age Range 8-16 years.	110 boys and girls
	High Heath, Green Lane, Shelfield Age Range 8-16 years.	120 boys and girls
	The Coppice, Abbotts Way, Westlands, Newcastle Age Range 7-16 years.	120 boys and girls
MALADJUSTI	ED BOYS	
	Ashley Residential School Age Range 11-16 years.	30 boys
FOR THE PH	HYSICALLY HANDICAPPED	
Mixed:	Wightwick Hall Residential and Day Age Range 5-16 years.	68 Boarding boys & girls 32 day places

FOR THE DELICATE AND PHYSICALLY HANDICAPPED

Mixed: Blackfriars, Newcastle (Joint School). Day Age Range 5-16 years.

80 boys and girls

FOR THE PARTIALLY HEARING

Mixed: Needwood. Residential Age Range 5-16 years.

145 boys and girls

DEAF

Mixed: The Mount, Stoke-on-Trent (jointly maintained with Stoke City)

Day and Residential.

Age Range 2-16 years.

70 Boarders 30 day places 12 nursery places

REPORTS ON SPECIAL SCHOOLS IN STAFFORDSHIRE

These reports are based upon information which the Director of Education has kindly supplied:—

(a) Loxley Hall

"The first year of use of the new school has shown the benefit of intercommunicating classrooms with much closer co-operation between classes and a stimulating interest in the work done by other boys. The gymnasium made continuous physical activity possible, irrespective of weather conditions and proved invaluable for recreation in the evenings and at weekends. The swimming pool was opened after Easter and continued in use until the end of October. Most of the junior school had never been in a pool before but almost all were able to swim by the time the weather compelled closure for the winter.

Outdoor activities covered a wide range of sports in friendly matches against schools in Staffordshire and adjoining counties.

At a one-week camp at Hales Hall sixteen boys were introduced to lightweight camping and a party of senior boys spent a week touring in Gloucestershire, and camping overnight. A weekend camp for juniors in Wales was also successful. Several day visits were made to zoos, London, Liverpool docks, Chester, and works and museums nearer to school.

A regular pattern of weekend leave was instituted with all parents having an opportunity to take their sons home for alternate weekends. Senior boys, capable of travelling alone, are encouraged to go home every weekend to help re-establish themselves in their local community before they leave school to start work."

(b) Standon Bowers

"There have been no major changes in school routine, curriculum, or buildings during the past year and the normal pattern of school life has been maintained.

Staff shortages and changes of staff have affected continuity and progression but, in spite of this, a full and varied programme of educational, recreational and social activities has been covered successfully.

Inter-house and inter-school football and cricket matches, athletics, swimming, cross-country running and indoor games competitions have been arranged and the general standards of attainment have been raised.

The school swimming pool was used regularly during the summer months and weekly classes at Newcastle Baths have been held throughout the winter period. Two boys gained the A.S.A. Bronze Medal for self-preservation and a number of boys have gained standard swimming awards. There have been a large number of visits to places of interest for educational and recreational purposes and in connection with the School Leavers' Programme.

Camping and hiking at weekends in the summer proved very popular and regular film shows and evening clubs and activities have continued. An average of fifteen boys has been home each weekend and many parents have visited the school regularly. Many former pupils have maintained contact by post, telephone and visits to the school.

Support has been given by the Church Men's Scoiety, Toc H and Round Table and Members have visited and taken part in school activities."

(c) Walton Hall

"The School has had its maximum of 48 girls throughout the year. The three girls who left in the summer were placed in employment.

In spite of reorganisation due to Staffing problems, the school has continued to function smoothly and a full programme of activities has been carried out. The Senior Peripatetic Teacher of the Deaf is visiting the school weekly.

Recreational and social activities have included Guides, Brownies, swimming and membership of external Youth groups."

(d) The William Baxter

"There has been a full complement of pupils and the staff has remained unchanged throughout the year. The pleasing, rural environment has played no small part in the well-being and smooth running of the school.

Visits made to local places of interest, as well as places of work, have been well worth while and much use has been made of the varied activities the school provides, such as garden plots, bee-keeping, upkeep of greenhouse, woodwork, pottery, domestic science and dressmaking. A very popular event during the summer term was the fashion show, where girls modelled clothing made by themselves.

Swimming facilities were made available through the Wolverhampton Authority and many awards have been gained during the year, notably silver and bronze medals (A.S.A.) for personal survival."

(e) High Heath

This school was opened in April 1965 and now has 79 boys and 40 girls on roll aged 7-16 years. Children travel daily from Lichfield, Whittington, Little Aston, Great Barr, Chase Terrace, Burntwood, Hammerwich, Pelsall, Shelfield, Aldridge, Brownhills and Walsall Wood.

The staff consists of eight teachers (including the Head) and a nursery assistant which gives a teacher/pupil ratio of 1 to 15, thus allowing for a very considerable degree of individual attention. In addition to work in reading, writing and arithmetic, the curriculum includes physical education, woodwork, pottery, music, dancing, drama, gardening, hairdressing and photography. All children are afforded the opportunity of receiving weekly swimming instruction at Lichfield swimming baths. Most of the children attend the local county library once a fortnight. An important part of the curriculum is educational visits and environmental studies. This work includes visits to police and fire stations, post offices and many of the local shops and factories. These visits provide the children with educationally exciting experiences about which they can write and read but most important of all it gives them a knowledge of the community in which they live and in which they will probably remain for the rest of their lives. It also helps to bridge the gap between school and community

and helps the local people to acquire a greater understanding of the school and its pupils.

The teachers maintain close contact with parents through the various school functions such as open evenings and Easter and Christmas services. When necessary, teachers call on parents in the evenings to discuss difficulties being encountered by children."

(f) The Coppice

"The school has now been established for three years and the number now on roll stands at 120 (mixed).

The I.Q. range remains at 50-75 (mean 66) and where possible children are admitted at 7 years of age, although older children entering the district already ascertained are admitted immediately.

During the year there have been some transfers to residential schools and in one case to a normal school.

The average attendance for the last year was 88%.

The practical nature of the school work has been continued, with outside visits, campings Youth Club activities and construction projects playing an important part."

(g) Ashley

"The school has continued to function in a very satisfactory manner with a full complement of staff. There can be no doubt of the long-term benefit of adequate staff accommodation available for residential school work.

A General Inspection of the School took place in March and a subsequent report was issued. With the exception of one or two minor criticisms, the report was very favourable.

Use has again been made of the County Camps; parties of boys have been twice to Port Dinorwic, whilst another party camped independently at Pont Llyfni. In addition a party of fifteen boys spent a very interesting and enjoyable week at the sailing centre at Chasewater. Use has also been made of the sailing facilities available at Stanley Pool. It is noteworthy that these outgoing activities have proved highly beneficial to this particular type of boy and most of them have received certificates. It is, perhaps, in swimming where the most heartening results have been achieved, namely, seven boys in the course of the year managed to gain "Personal Survival" Gold Badges. The usual rota of inter-school fixtures in cricket, football and athletics have taken place together with social evenings with the nearby Girls' Residential School.

A very successful "Open Day" was held in July and also a "Sports Day", when many parents and friends attended the school. The Annual Outing to Rhyl took place on 11th July, 1967.

Eight boys left school during the year and all of these have made a very satisfactory start in employment. Many boys still continue to go home for weekends and this has helped, not only the boys themselves, but has also led to greater co-operation from their parents."

(h) Wightwick Hall

"Only three resident pupils left the school in 1967, with the result that accommodation difficulties were experienced when considering and catering for new admissions. 1967 was further complicated by teaching staff problems; two teachers left the school on promotion to Headships; the Deputy Head Teacher retired, and one assistant teacher emigrated to Canada.

In spite of these problems the school has developed satisfactorily—activities and visits being as varied as in the past. Outstanding in the list of social functions in the year was the Garden Fete when hundreds of parents and friends helped in raising £400. Round Tablers again helped in organising and running the sideshows. The money will eventually help to provide one of a number of desirable amenities which could not reasonably be a charge on County funds.

Most of the remaining army huts in the grounds have been demolished and a new area adjacent to the tennis court made up and levelled as a result. It is hoped that, when surfaced, the younger children on tricycles will be able to use it, thus giving them freer and safer activity away from any traffic in the grounds.

An expensive item of new equipment was installed in the laundry at the beginning of the year. This can deal automatically with the increasing amount of soiled clothing of the incontinent children. This unpleasant work was becoming a considerable burden for the Houseparents and it is appropriate to remark on the Authority's prompt action to solve the problem."

(i) Blackfriars

"The completion of the two extra classrooms during the year 1967 will benefit the school. One of the classrooms is a purpose-built infants' room which includes an activity area and two toilets which have special provision for the badly handicapped. The other room will be used for commercial

work and visual aids. A high proportion of our children enter clerical work so we can now provide the facilities which they need.

The extension to the kitchen has enabled us to provide the extra school dinners for the increased numbers.

There were seven school leavers, four of whom have been employed in open industry and three are attending Colleges of Further Education.

The most noteworthy aspect of outside school visits last year was a party of badly handicapped children who went to France for a week. This party included four wheelchair cases. Visits were made to Paris, Fecamp and Rouen."

(i) Needwood

"Applications for admission were again from a wide range (4 to 14 years), and twenty-five pupils were admitted in the year. The Area Youth Employment Officer came to interview leavers on three occasions and twelve left for employment. Five went to other special schools, three were successful in the joint entrance examination for the Mary Hare Grammar School and Burwood Park Technical School for the Deaf and three pupils returned to ordinary schools.

In the Certificate of Secondary Education examinations four pupils secured passes in the English and Maths. papers. Ten pupils were confirmed by the Bishop of Lichfield. In the October half-term the successful old pupils' reunion of 1966 was repeated with some coming from Durham, Surrey and North Wales.

The school bus has been in great demand for sports fixtures, sailing parties at Chasewater, visits to factories by seniors and general local educational visits. A four-day visit to London by four senior classes was well worth while and two intermediate classes had a day visit there at a later date.

Class hearing aid equipment was renewed in three rooms with modern group aid sets, and acoustic conditions in all classrooms were improved by the laying of special floor covering."

(k) Biddulph Grange Hospital School

"In May 1967, when Staffordshire took over this school from Lancashire County Council, there were 35 children on roll, ages ranging from 2 years to 15+. Over the rest of the year there have been variations of between twenty and forty, with admissions tending to decrease during public holiday periods.

There is a school staff of six, and the child patients in this Orthopaedic Hospital are divided between two wards on the top floor overlooking the extensive grounds—both wards have verandahs, on which teaching often takes place during the warm months.

The curriculum tries, as much as possible, to adhere to that of the children's own schools. As each ward is supplied with both TV and radio, the programmes for schools are regularly followed and enjoyed. Archery and chess are practised enthusiastically in the Boys' Ward.

During the Autumn term one 17-year-old girl worked for some 'A' and 'O' levels and among the Juniors there were a few 11 + candidates.

The local Rotarians gave a most handsome Christmas party, in which the adult patients also joined, and visits to the circus and the pantomime have also been arranged by kind friends."

(1) Prestwood Hospital School

"Numbers on roll have again been mostly in the twenties, but during 1967 the proportion of immigrant children admitted has increased steadily and they now form about 85% of intake, Asians being the largest group. This has meant that the bias of the school has shifted and emphasis is now placed on the teaching of English as a foreign language. Extra aural aids have been granted for this and use is being made of the draft teaching materials for the Schools Council Project in English for Immigrant children.

Children are now allowed to get up and come into the classrooms at an earlier stage in their treatment. This has considerably reduced the amount of bedside teaching and the time-consuming movement of equipment and enables the children to make greater use of classroom facilities.

Further large play apparatus for the younger children, mostly for use in the ward, has been generously granted during the year. This is especially valuable to the under-fives, who are most vulnerable to separation from home.

During the long summer holiday teams of student teachers from Madeley College of Education were again employed to occupy the children.

We continue our walks in the hospital grounds and short educational visits by car. This exploring of the local environment stimulates interest and discussion and is a great help in minimising time spent in hospital."



STAFFORDSHIRE COUNTY COUNCIL

BOROUGH OF NEWCASTLE-UNDER-LYME

(EXCEPTED DISTRICT)

SCHOOL HEALTH SERVICE REPORT

for 1967

BY THE

Borough School Medical Officer

BOROUGH OF NEWCASTLE-UNDER-LYME

(Excepted District)

SCHOOL HEALTH SERVICE STAFF

Borough School Medical Officer:

JOHN WARRACK, M.B., Ch.B., D.P.H.

Deputy Borough School Medical Officer:

JOHN A. SCULLY, M.A., M.B., Ch.B., B.A.O., D.P.H. (Appointed 23/1/67)

School Medical Officers:

LAURA CULLEN, L.R.C.P. & S.I., L.M.

EDITH PARRY-EVANS, M.B., B.S.(Lond.), M.R.C.S., L.R.C.P. (Died 1/1/67)

Douglas G. Garvie, M.B., Ch.B., (Part-time)

BARBARA J. CAWTHORNE, M.R.C.S., L.R.C.P. (Part-time) (Appointed 26/6/67)

ANNIE A. GAMBLE, M.B., Ch.B., B.A.O., D.P.H. (Parttime) (Appointed 9/1/67)

Physiotherapists (Part-time):

MRS. T. J. BLADEN, M.C.S.P.

MRS. B. WAIN, M.C.S.P.

MRS. S. WOOD, M.C.S.P. (Resigned 21/7/67)

MRS. M. BOWCOCK, M.C.S.P. (Appointed 5/9/67)

Speech Therapists (Part-time):

Mrs. S. J. Brindley

Miss S. Hurst (Appointed 12/1/67). Resigned 27/4/67)

Ophthalmic Surgeon (Part-time):

P. J. M. KENT, M.R.C.S., L.R.C.P., D.O.M.S.

Borough School Dental Officers:

MISS D. A. CHELMICK, B.D.S. (Resigned 10/9/67)

MRS. JEAN PLUMB, L.D.S., R.C.S. (Part-time)

LESLIE J. MYATT, B.D.S., L.D.S., R.C.S. (Part-time)

MRS. BERYL CULL, B.D.S., L.D.S., R.C.S. (Part-time)

Dental Anaesthetists (Part-time):

DR. Z. S. MILEWSKI

Dr. J. F. THOMPSON

Health Education Officer:

N. Rushworth, M.I.H.E. (Appointed 1/2/67)

NURSING ESTABLISHMENT

At the end of 1967, there were seven nurses engaged in the school health service, four of these being temporary full-time school nurses and three being health visitors/school nurses. The whole-time equivalent available at the year end was 5.20, a deficiency of 2.4 whole-time staff.

SCHOOL POPULATION

The number of pupils on the registers of maintained schools (including nursery schools) at the end of the year was 13,977. This represents an increase of 258 over 1966.

Number of schools or departments:—

Nursery Schools	 	4
Infant Departments	 • •	13
Infant & Junior departments	 	9
Junior departments	 	12
Secondary Modern Schools	 • •	10
Secondary Grammar Schools	 • •	4
Blackfriars Special School	 	1
The Coppice Special School	 • •	1
		54

INFORMATION OBTAINED BY MEDICAL INSPECTIONS

Physical Condition

The physical condition of the children examined at periodic medical inspections is shown in Table 1.A in the statistical tables at the end of this report.

Uncleanliness

Eight children were found to be verminous at routine school medical inspections.

At periodic cleanliness inspections of children 50,251 examinations were made and 1,421 individual pupils were found to be infested. Cleansing notices were issued in 730 cases.

256 children were cleansed at special sessions at school clinics.

Tonsils and Adenoids

At periodical and special examinations 66 children were found to be suffering from enlarged tonsils and/or adenoids and were referred for examination by a specialist. During the year 207 cases received operative treatment through arrangements made by the School Health Service. In addition there were 287 cases which required only medical treatment and/or observation.

Skin Diseases

Eight cases of skin disease were found to require treatment.

External Eye Diseases

Four cases of external eye disease were referred for treatment during the year to the North Staffs. Royal Infirmary.

Defective Vision and Squint

89 cases of defective vision and 8 cases of squint were discovered at routine and special medical examinations and were referred for treatment.

The Ophthalmic Clinic is held each Monday morning at Friarswood School Clinic. During the year 760 children had refraction and 123 pairs of spectacles were prescribed after examination by an Ophthalmic Surgeon.

Ear Diseases and Defective Hearing

At routine medical inspections, 15 cases in this category were found to require treatment and all were referred to Consultants at local hospitals.

ADDITIONAL EXAMINATIONS

Medical Inspection prior to admission to Training Colleges

During 1967, 92 pupils had a special medical examination by a School Medical Officer before admission to colleges for training for the teaching profession, and all were declared medically fit.

Medical Inspection of new Entrants to the Teaching Profession

During 1967, 25 medical examinations, including a chest X-ray, were carried out on new entrants to the teaching profession. All the new entrants successfully passed this medical examination.

Children attending School Camps

During the year, 11 children were medically examined before attending organised School Camps.

PHYSIOTHERAPY

The physiotherapists provided treatment at the Clinic at Friarswood House, Priory Road, Newcastle and at Blackfriars School, as shown below.

BLACKFRIARS SCHOOL

(Mrs. B. Wain and Mrs. M. Bowcock)

Breathing Exercises, Remedial Exercises and Sun-Ray Clinics held on—Mondays . 9.15 a.m.-12 noon

1.30 p.m.-3.30 p.m.

Tuesdays & Thursdays

9.15 a.m.-12 noon

Hydrotherapy Sessions held-

Wednesdays 9.15 a.m.-12 noon

1.30 p.m.-3.30 p.m. Fridays

Attendances during 1967 were as follows:—

	Breathing Exercises	Remedial Exercises (Including Hydrotherapy)	Sun-Ray Treatment
Children Attendances	 43 855	61 2,201	11 67

FRIARSWOOD CLINIC

(Mrs. J. T. Bladen)

Breathing and Remedial Exercises and Sun-Ray Treatment Sessions held-Tuesday and Thursday ... 10.0 a.m.-12 noon

Attendances during the year were as follows:—

	Breathing Exercises	Remedial Exercises	Sun-Ray Treatment
Children	 36	57	40
Attendances	404	610	. 393

CHILD GUIDANCE

61 children were referred to the Child Guidance Clinic in the Mental Health Centre, Newcastle. At the end of the year 11 children were under treatment and there were 16 children waiting to be seen by the Psychiatrist.

MINOR AILMENT CLINICS

During the year eight minor ailment clinics in the Borough continued to operate as follows:—

Bradwell C.S.M.

School Tuesday 9.30 a.m. to 10.15 a.m.

Chesterton—

Loomer Road Monday 9.30 a.m. to 12 noon

(Dr. attends 10.30 to 12 noon)

Crackley Bank

C.P. School Wednesday 10.0 a.m. to 11.0 a.m.

Hempstalls C.P.

School Wednesday 10.0 a.m. to 11.0 a.m.

Knutton—

Knutton Lane Tuesday 10.30 a.m. to 12 noon

(Dr. attends 11.0 to 11.30 a.m.)

Friday 9.30 a.m. to 10.30 a.m.

Newcastle-

Friarswood Monday 2.0 p.m. to 4.0 p.m.

(Dr. attends)

Wednesday 9.30 a.m. to 12 noon

and (Dr. attends 10.30 to 12 noon)

Friday

Silverdale—

Crown Street Tuesday 9.30 a.m. to 11.0 a.m.

(Dr. attends 10.0 to 10.30 a.m. when required)

Porthill—

Inglewood Drive Tuesday 10.0 a.m. to 11.0 a.m.

Thursday 9.0 a.m. to 12 noon

(Dr. attends 10.45 a.m. to 11.45 a.m.)

The cases dealt with are included in Table III at the end of this report. During the year the number of attendances at the various minor ailment clinics was 9,214 which is an increase of 848 on the figure for 1966.

SCHOOL DENTAL SERVICE

Statistics regarding children inspected and treated during the year are given later in the report in Table IV.

SCHOOL SWIMMING BATHS

Samples of water from school swimming baths were, as usual, examined.

Newcastle High School

12 samples of water were submitted from this bath for examination at the laboratory. The chlorine content was satisfactory in 11 but slightly below standard in 1. 12 of the samples were examined bacteriologically also and were found to be satisfactory.

Hempstalls C.P. School

12 samples of water were examined for chlorine content of which 10 were satisfactory and 2 were slightly below standard. 13 samples were also examined bacteriologically of which 2 were not satisfactory.

Blackfriars School

11 samples of water were taken of which in 10 the chlorine content was satisfactory but in 1 was slightly below standard. 11 of the samples were also examined bacteriologically and found to be satisfactory.

Clayton Hall Grammar School

6 samples of water from this bath were examined for chlorine content and all were found to be satisfactory. 6 samples submitted for bacteriological examination were also reported as being satisfactory.

HEARING TEST SURVEY

All Infant Departments were visited by the audiometrist, and the children in the 6 + age group were tested. The results of the survey and the follow-up cases is tabulated below.

No. Examined	No. showing some hearing loss	Percentage having a hearing loss
1,679	115	6.8

Follow-up:—

25 children were referred for treatment and specialist's opinion, as shown below:—

	Obser	vation	Treatm	ent Advise	d			
No. Referred	Re-exam. by Specialist after 3-6 months	Further hearing test after 12 months	T's & A's operation	Myring- otomy	General medical super- vision	No treat- ment advised	Reports pending	
25	_	4	_	5	4	6	4	2

DISINFECTION OF PLIMSOLLS

As usual, the plimsolls used in the schools were disinfected at the disinfection centre in Knutton Lane in an endeavour to control the incidence and spread of foot infections.

INSPECTION OF SCHOOL MEALS PREMISES

During the year the Public Health Inspectors of the Borough paid 116 periodic visits to premises connected with the preparation and serving of school meals. The defects found were reported to the Borough Education Officer.

MILK IN SCHOOLS

The milk supplied to schools is sampled from time to time by the Public Health Inspection Staff. During the year 30 such samples were submitted for examination at the Public Health Laboratory and all were found to be satisfactory, both in cleanliness and degree of pasteurisation.

X-RAY OF KITCHEN STAFF

121 members of the school meals service kitchen staff were X-rayed at the Chest Clinic under the scheme whereby each applicant for a post in this service must be declared free from pulmonary infection radiographically before being appointed.

Health Education

In addition to continuing the issue of posters to schools on various aspects of health, a pilot scheme for a course in Health Education has been started at Watlands Secondary School.

This school already runs a programme on the broader aspects of living; the intention of which is to prepare pupils for life when they leave school. In this respect the Watlands was ideal territory for a Health Education course which could be co-ordinated into the existing school programme. It is probably some indication of the value placed upon Health Education by the Head that he has expressed a wish to use the services of the Health Education Officer to a much greater extent during 1968.

So far the pilot course has covered such aspects as Care of the Skin, Care of the Feet, Dental Health, The Dangers of Smoking, The Importance of Exercise and Recreational Pursuits and The Importance of the Family. It is intended that additional aspects such as the facilities offered by the Health Services and The Importance of Correct Diet should also be included.

Once a clear pattern has emerged it is hoped that courses on similar lines can be offered to other Secondary Schools in the Borough.

From time to time pupils of Secondary Schools are set, as special projects, tasks involving research into various aspects of community life. The Health Education Officer has been able to assist many of these young people whose projects concerned Health and Welfare.

In the Further Education field a talk was given to students of the Nursery Nurses' course at the Newcastle College of Further Education. As a result of this one of their lecturers has asked for more talks.

SCHOOL MEALS REPORT

The following information in connection with the School Meals Service has kindly been supplied by Miss M. P. Barnes, School Meals Organiser.

"During the year, school meals continued to be served from the following kitchens:—

Blessed Thomas Maxfield
R.C. School
Bradwell C.P. School
Bradwell C.S. School
Bursley C.P. School
Cherry Hill C.P. School
Crackley Bank C.P. School
Ellison Street C.P. School

Newcastle C. of E. School
Orme Boys' C.S. School
Our Lady & St. Werburgh's
R.C. School
Seabridge C.P. School
Seabridge C.S. School
Silverdale C.P. School
St. Michael's C.E.V.C.

Eagle and Child Annexe Hempstalls C.P. School Hillcrest C.P. School Knutton Central Kitchen Langdale C.P. School Knutton C.S. School

Infants' School
St. Wulstan's R.C. School
Blackfriars School
The Coppice School
Four Nursery Schools
Four Grammar Schools

Figures given below show the daily average number of meals served each month throughout the year as compared with 1966.

Month	1966	1967	Month	1966	1967
January	 9,121	10,125	July	8,525	9,373
February	 8,536	9,857	August	Holiday	period
March	 8,982	9,851	September	9,703	10,298
April	 9,166	10,115	October	9,658	10,384
May	 9,148	9,884	November	9,466	10,126
June	 8,745	9,577	December	9,582	10,248

Holiday Feeding

Arrangements for the provision of meals during holiday periods were made so that any child could, on application, receive a school dinner. Children who stayed away for more than half the total number of days in any one holiday period, unless the parents had given a satisfactory explanation as to the reason for their absence, were denied meals during the ensuing two holiday periods. On reinstatement, in cases of further default, the privilege of being included in future holiday feeding arrangements is withdrawn. In every case, letters were sent to the parents of the children concerned explaining the reason why they could not have dinners. Approximately 175 children applied for meals during each holiday period.

The holiday meals were supplied on rota from the following kitchens:—

Bradwell C.P. School Ellison Street C.P. School Bradwell C.S. School Knutton Central Kitchen Crackley Bank C.P. School Seabridge C.P. Infants' &

Junior School

and distributed to various meals centres throughout the Borough.

Arrangements were made to open one meals centre in each of the following areas:—

(a) Chesterton (b) Knutton/Silverdale (c) Newcastle.

Price of Meals

The price of dinners to school children including Nursery school children, remained at one shilling per meal. Meals for staff and visitors were 2s. 4d. each, traffic wardens and groundsmen were 2s. 5d. each and meals on wheels remained at 1s. 10d. each.

Light Equipment

Light equipment both for replacement and additional purposes was supplied to all kitchens and schools each term. All beakers have been replaced with Duralex glasses which are much better for using in the sterilising sinks.

Maintenance of Equipment

All electrical equipment, except refrigerators which were checked once, were serviced three times during the year. All gas equipment was serviced twice. All insulated food containers used for the transport of school meals were serviced twice during the year to ensure that there was a minimum amount of loss of heat during the time the meals were being transported from the various kitchens to the dining centres.

Nursery Schools

Cod liver oil was supplied to children only on the recommendation of the School Medical Officer. Orange juice was supplied daily to all children.

Meals on Wheels Service

The Authority continued to supply "Meals on Wheels" and these were distributed by members of the Women's Royal Voluntary Service. Owing to increased numbers it was found necessary to supply the meals from two kitchens (Langdale C.P. School and Bradwell C.S. School) as from the 1st October, 1967.

During holiday periods the meals were prepared at the kitchen open for holiday feeding. All containers used were sterilised daily.

Owing to heavy expenses the W.R.V.S. did not wish to have the normal turkey meal for Christmas, a pork meal followed by Christmas pudding was supplied instead.

Hygiene

As in previous years, visits were made to kitchens and wash-ups by Public Health Inspectors. Undesirable features were dealt with as and when money became available and the opportunity arose.

School meals staff continued to be medically examined and had a chest X-ray prior to their official appointment. It was still necessary for staff to produce, after any period of absence, a medical certificate stating that they were free from any disease which might make the preparation or handling of food by them harmful to others.

No case of active tuberculosis or other serious disease was found amongst the staff of the School Meals Service who attended for chest X-rays when the Mobile Unit was located in Hassell Street C.P. Junior School yard on Wednesday, 11th October, 1967.

A full specimen meal was retained in the refrigerator at

each kitchen every day and kept for twenty-four hours.

No re-heated dishes were served and any left-over food was disposed of daily. Dish cloths, teacloths, floor cloths and aprons were boiled daily.

Uniform was laundered weekly and replaced whenever necessary.

First Aid supplies, cleaning materials and grease-proof paper were issued to the kitchens and schools at the beginning of each term.

Meetings and Courses

On Saturday, 10th June, 1967 twenty Cook Supervisors and five Cooks-in-Charge attended a one-day Conference at Graham Balfour Grammar School, Stafford.

The following lecture/demonstrations were given:—

- (a) Joints of Meat, followed by a Meat Cookery Demonstration
- (b) Hygiene in the Institutional Kitchen
- (c) Sensible Skin Care and Make-up.

Four members of the School Meals Service attended for one day per week at the North Staffs. College of Food Technology; one passed the City and Guilds 147 examination and is now attending classes in connection with the City and Guilds 151; two passed the College internal examinations.

One of the trainees was awarded a Governor's Prize at the above College.

New Kitchens (Orme Boys' C.S. School and Seabridge C.P. Infants' & Junior School)

The kitchens at both of these schools opened on the 1st February. They are well equipped with modern cooking appliances and stainless steel sink units. They have two "sittings" and the "family" or "table service" method of serving is in operation, *i.e.* small groups dine together as "families" and the meal is served at the table.

Christmas Dinners

Thirteen schools opted to serve turkey in place of pork for the annual Christmas Dinner. The excess costs were met from school funds.

The school dinner is one of the most important and frequent occasions on which large numbers of pupils are assembled together to act as a community or one large family. By its very nature, this daily act is necessarily part of the corporate life of the school and its traditions must deeply affect both the attitude of the child and the tone of the school. Under proper conditions, it affords an outstanding opportunity for social training, without which education is incomplete; for teaching good manners and for the establishment of sound dietetic habits."

PHYSICAL EDUCATION

Mr. G. B. Kirkby, the Physical Education Organiser, has kindly supplied the following report:—

"GENERAL SURVEY

The staffing of the P.E. Departments in Secondary Schools caused little concern as applications have once again exceeded resignations. This has meant that the standard of physical education has maintained a very high level, especially in the fringe subjects.

Clothing and plimsolls are still provided in the Secondary Modern and Primary Schools, though the cost of this service increases yearly, and the question of adequate laundering raises many problems. In the special schools bath towels for showering are also available.

Disinfection of plimsolls, to combat foot infection, is carried out at the end of each term.

Cleanliness of changing areas and shower units is of the highest standard possible. Swabbing out and disinfection is part of the daily routine.

FACILITIES

Secondary Departments

All the Secondary Departments now have the use of indoor facilities for physical education and special facilities for changing. All but one Secondary School have shower facilities.

Primary Departments

All Junior and Infant Departments now have indoor facilities for P.E.

SUMMARY OF FACILITIES

Secondary	Y
-----------	---

Schools	Gyms	Sports Halls	Gym/Halls with fixed apparatus	Halls	Changing Rooms	Showers
14	8	3	5		13	13

Infant

	Schools	Halls	Fixed Equipment	No Indoor Facilities
-	12	12	9	0

Junior

Schools	Halls	Fixed Equipment	Changing Facilities
19	19	15	10

All Junior schools with suitable accommodation have now been equipped with fixed apparatus. Of the three schools without fixed apparatus, one uses a hall which is not the property of the L.E.A. and the other two use halls the fabric of which would not stand the stress of fixed apparatus. Some modification is being carried out to apparatus in two junior halls to facilitate easier handling.

STAFFING

Primary

Semi-specialisation in physical education is to be noted in some schools. Members of staff with an advanced knowledge of branches of the subject are taking classes other than their own for P.E. This is particularly noticeable in dance. In the main this trend is an advantage.

Secondary

The ideal staffing position would have been as follows:—

		Men	Women
Specialist Teachers			
(Diploma of Physical Education)	14	14
Teachers with advanced training in	1 P.E	5	5
Actual staffing position was:—			
Diploma of Education		13	12
Advanced Training		3	7

PLAYING FIELDS, GAMES AND ATHLETICS

There is still a marked lack of playing fields in the Borough but by the full use of all-weather pitches at Porthill Playing Field, Bradwell and Knutton Schools and the hire of Parks Department pitches the position has been relieved a little. Unfortunately, the Ashfields site is still not available and a number of our school fields have been out of commission because of drainage troubles. The Playing Fields Department has carried out considerable work on various fields to alleviate draining problems.

The playing fields available, however, have been worked to and above their maximum loading, in catering for a wide variety of games and sports. Full use has been made of the temporary playing field, prepared by the Playing Fields Department, on the future Orme/Westlands playing fields site.

The athletics track and games area at Ashfields is nearly completed and it is hoped that the first meeting will be staged in the Spring of 1968.

SWIMMING

Primary Schools

The teaching bath at Hempstalls School, supplemented by use of Blackfriars and Clayton Hall baths, ensures that every child in the Borough in its last year in Primary School has the opportunity of swimming instruction. A considerable number of those in their third year also attend swimming sessions.

The tuition is by professional swimming teachers aided by members of staff.

The teaching of swimming to Primary children has been worthwhile as the results show. The Water Proficiency Test shows that 72% of children attending the bath have learnt to swim during the past year and a further 382 have passed the Red Braid Award.

Secondary Schools

Attendances and Awards

Class Teaching Attendances	Swimming Club						RLSS	ASA	Bor- ough	
Boys 59,894	5,277		65	255	70	426	343	190	12	119
Girls 39,859	4,746	97	312	90	18	476	126	92		192

CAMPING

542 pupils from Borough Schools attended camps at Cotwalton, Shugborough, Coven and Chasewater during the Summer Term.

At these camps hiking, canoeing, sailing and rock climbing are taught, as well as basic camp craft.

During the Autumn Term 12 boys and 15 girls attended Adventure Courses. These are only a small portion of the children who applied as accommodation was limited.

Schools continue to make use of the camping equipment which can be obtained on loan from the Education Office.

The Sailing Centre for Borough schools established at Stanley Pool in 1962 had a most successful season. The camp was occupied every weekend from Whitsuntide to the end of October. Several schools also arranged full week camps there.

TEACHERS' REFRESHER COURSES

Teachers from the Borough attended various courses in Physical Education both locally and also at centres organised by outside bodies.

ADVANCED TRAINING COURSES

Advanced training courses in football, netball, hockey, trampolining, swimming, basketball and educational dance were arranged during the Easter holidays. The aim of these courses is to give the best performers in the Borough and district schools the opportunity of advanced coaching and training. Outside coaches are employed and teachers from various sporting associations act as administrators and extra coaches. The excellent results obtained during the courses, and the 'carry over' into schools, have shown that this project is well worthwhile.

CONCLUSION

No report of this nature would be complete without a tribute to the number of teachers who willingly give of their own time to supervise children undertaking various physical activities. Without their unstinting help much of the physical education programme would be curtailed."

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools (including Special Schools). Year ended 31st December, 1967.

TABLE I.
PART A—PERIODIC MEDICAL INSPECTIONS

Age Groups		No. of	Physical Condition of Pupils Inspected			
Inspected		Pupils	Satisfactory	Unsatisfactory		
(By year of Birt	<i>n</i>)	Inspected	No.	No. (4)		
(1)		(2)	(3)	(4)		
1963 and later		118	117	1		
1962		6 5	65			
1961		1,037	1,037	and the same of th		
1960		132	131	1		
1959		84	83	1		
1958		565	562	3		
1957	1	348	345	3		
1956		70	70	man-		
1955		81	81			
1954		71	71			
1953		1,052	1,039	13		
1952 and earlier		499	490	9		
TOTAL		4,122	4,091	31		

Column 3 total as a percentage of Column 2=99.25% Column 4 total as a percentage of Column 2= 0.75%

PART B—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS

(excluding Dental Diseases and Infestation with vermin)

Age Groups Inspected (By year of birth	h)	For Defective Vision (excluding squint)	For any of the other conditions recorded Table II	Total Individual Pupils	
1963 and later			8	8	
1962		_	2	2	
1961		7	24	31	
1960		_	30	30	
1959		1	16	17	
1958		10	21	28	
1957		11	21	32	
1956		2	3	5	
1955		_	4	4	
1954		1	6	7	
1953		32	59	89	
1952 and earlier		23	20	43	
TOTAL		87	214	296	

PART C-OTHER INSPECTIONS

Number of Special Inspection	ns	 	 	 	162
Number of Re-Inspections		 	 	 	314
Total		 	 	 	476

PART D—INFESTATION WITH VERMIN

Total number of examinations of pupils in schools by School Nurses or other authorised persons	50,251
Total number of individual pupils found to be infested	1,421
Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	730
Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	256

TABLE II.

Return of Defects found by Medical Inspection during the year ended 31st December, 1967

PART A—PERIODIC INSPECTIONS

LAL	Requiring Observa- tion	88	397 51 44	\$4 \$7 \$7	280 40 60	35 163 97	8 4 1	87 1119 1119	16 24	21 . 87	30 216
TOTAL	Requiring Treat- ment	7	87 8 3	พพ	99	01 4	en	5 15		4	24
OTHERS	Requiring Observa- tion	17	95 13 20	°257	65 10	2882	44	33 33 35	811	34	28 8
OT	Requiring Treat- ment	2	29	71-	507	-	12	4-4		-	7 m
LEAVERS	Requiring Observa- tion	39	289 12 8	491	-971	38	3.2	444 77	10	12	102
LEA	Requiring Treat-	ю.	52	1.1	188	20	11	146	-	1-	21
ENTRANTS	Requiring Observa- tion	32	13 26 16	19	122	28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	24	19 41 37	3.5	41	56
ENT	Requiring Treat- ment	2	944	m 4 -	28	120		144	- 1	2	
	Defect or Disease	Skin	(a) Vision (b) Squint (c) Other	(a) Hearing (b) Otitis Media	Nose and Throat	Lymphatic Glands Heart Lungs	(a) Hernia	(a) Posture (b) Feet (c) Other	Nervous System— (a) Epilepsy (b) Other	(a) Development (b) Stability	Abdomen Other
Dofort	Code No.	44	n 4	>	r. 00 0	y21;	7 :	S ;	4 4	CI	17

PART B—SPECIAL INSPECTIONS

Diefort			SPECIAL INSPECTIONS						
Defect Code No.	Defect or Disease		Pupils requiring Treatment	Pupils requiring Observation					
4	Skin		1 2 3	3					
5	Eyes—(a) Vision		2	7					
	(b) Squint		****	_					
	(c) Other		. 1	_					
6	Ears—(a) Hearing	*	2	1					
	(b) Otitis Media		dimension	_					
	(c) Other		1	4					
7	Nose and Throat		_	7					
8	Speech		* ***	2					
9	Lymphatic Glands		.,	7					
10	Heart		y Militipanyo.	20 .					
11	Lungs	• •		. 26					
12	Development—		1 01 00						
	(a) Hernia	• •							
	(b) Other		1	1					
13	· Orthopaedic-								
	(a) Posture	• • •	4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	. 2					
-	(b) Feet			4					
14	(c) Other Nervous System—								
14	(a) Enilopsy			0					
	(a) Epilepsy (b) Other	* *		5 10.					
15	Psychological—	• • •							
13	(a) Development			14					
	(b) Stability		-	27					
16	Abdomen			6					
17	Other			13					
1 /	Other			13					

TABLE III.

Treatment of Pupils attending Maintained Primary and Secondary Schools (including Nursery Schools)

Part A-Eye Diseases, Defective Vision and Squint

Volume 1	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint Errors of refraction (including squint)	. 196 760
Total	956
Number of pupils for whom spectacles were prescribed	123

Part B-Diseases and Defects of Ear, Nose and Throat

	Number of cases known to have been dealt with
Received operative treatment— (a) for diseases of the ear (b) for adenoids and chronic tonsillitis	25 173 4 425
Total	627
Total number of pupils in schools who are known to have been provided with hearing aids— (a) in 1967	• • • • • • • • • • • • • • • • • • •

Part C—Orthopaedic and Postural Defects

					Number of cases known to have been treated
(a) Pupils treated at school(b) Pupils treated at school	clinics or out-pa	tients	departi	ment	72
postural defects	or physiothe		cimics	ior	248
	Total		• •		320

Part D—Diseases of the Skin (exluding uncleanliness, for which see Part D of Table I)

					Number of cases known to have been treated
Ringworm—(a)	Scalp	 	 	 	
(b)	Body	 	 	 	
Scabies		 	 	 	4 23
Impetigo		 	 	 	23
Impetigo Other skin disea	ses	 	 	 	2,003
		Total	 	 	2,030

Part E-Child Guidance Treatment

			Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	 .,	• •	38

Part F—Speech Therapy

			Number of cases known to have been treated
Pupils treated by Speech Therapists	 :	 • •	47

Part G-Other Treatment Given

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	2,536
(b) Pupils who received convalescence under School Health Service arrangements (c) Pupils who received B.C.G. vaccination (d) Other than (a), (b) and (c) above	12 1,189
Respiratory	9 · . 847
Total	4,593

TABLE IV.

Dental Inspection and Treatment carried out by the Authority during 1967

The dental officers devoted 707 sessions to treatment and 42 to inspection.

Insp	pections			Pupils
(a)	First inspection at school			2,421
(b)	First inspection at clinic			220
(0)	Number found to require treatment	• •	• •	1,787
	Number offered treatment			1,787
(c)	Re-inspections at school clinic			541
(0)	Number of these found to require treat			417
	1			
A ++	endances and Treatment			
Att				1 500
	First visit	• •	• •	1,588
	Subsequent visits	• •	• •	3,002
-	Total visits			4,590
	Total visits	• •	• •	
•	Additional courses of treatment comme	enced		117
	Fillings in permanent teeth			2,364
	Fillings in deciduous teeth	• •	• •	446
	Permanent teeth filled		• •	2,176 432
	Deciduous teeth filled	• •	• •	491
	Deciduous teeth extracted	• •	• •	1,220
•	General anaesthetics		- %= .	86
	Emergencies			208
	Number of Pupils X-rayed			36
	Prophylaxis			637
	Teeth otherwise conserved	• •		8
	Number of teeth root filled			5
	•	• •		2
				1,108
	Course of treatment completed	• •	• •	1,100
Ort	hodontics			
	New cases commenced during year			10
	Number of removable appliances fitted			10
	Pupils referred to Hospital Consultant		• •	5
	Number of dentures supplied	• •	• •	4

TABLE V.

Staff of the School Health Service

	Number of Officers	Number in terms of full-time Officers employed in the School Health Service
*(a) Medical Officers (including the Borough School Medical Officer) (i) Whole-time School Health Service		_
(ii) Whole-time School Health and Local Health Services	3	1.25
(iii) General Practitioners working part-time in the School Health Service (b) Physiotherapists, Speech Therapists,	3	0.5
etc. (specify)— Physiotherapists	3 1	1.2 0.09 0.2
Chiropodist Speech Therapist (c) (i) School Nurses	i 1 7	0.06 0.18 5.2
(ii) No. of the above who hold a Health Visitor's Certificate	_ 3	

		employed on lary basis	Officers employed on a sessional basis	
(d) Dental Staff—	Number of Officers	ployed in the	Number of Officers	ployed in the
(i) Principal School Dental Officer (ii) Dental Officers			-3	1.20
(iii) Orthodontists (if not already included in (d)(i) or (d)(ii) above (iv) Dental Surgery Assistants	_	_		1.00
(v) Other Staff (specify)— Dental Anaesthetist	_	_	1	-

^{*} All Medical Officers of the School Health Service other than those employed part-time for specialist examination and treatment only.

TABLE VI.

(i) NUMBER OF SCHOOL CLINICS (i.e. Premises at which clinics are held for school children) provided by the Local Education Authority for the medical and/or dental examination and treatment of pupils attending maintained primary and secondary schools.

NUMBER OF SCHOOL CLINICS .. 10 (including one Mobile Dental Clinic)

(ii) TYPE OF EXAMINATION AND/OR TREATMENT provided at the school clinics either directly by the Authority or under arrangements made with the Regional Hospital Board for examination and/or treatment to be carried out at the clinic.

						ol Clinics (i.e. premises) reatment is provided
Examinatio	n and/c	or trea	iment		Directly by the Authority	Under arrangements made with Regional Hospital Boards or Boards of Governors of Teaching Hospitals
Minor Ailment ar			n-spec	ialist		
examination or	treatn	nent			8	_
Dental					2	_
Ophthalmic					1	
Speech Therapy					2	_
Physiotherapy					2	
Sun Ray (U.V.L.)					1 2	-
Chiropody					1	17
Remedial Exercises		• •	• •	• • •	2	_
						1

TABLE VII.

RETURN OF HANDICAPPED CHILDREN

Total	(11)	32 Day	6 Res.	10 Day 5 Res. 11 Day 8 Res.	21 Day 13 Res.
tic h Defects	(10)		1		
(9) Epileptic (10) Speech Defects	(6)				
justed	(8)	=	æ	225	٣٦
(7) Maladjusted (8) E.S.N.	(7)		2	3 1	4
(5) Physically handicapped (6) Delicate	(9)	7	-	0	0 m
(5) Physicall capped (6) Delicate	(5)	10		w wa	× 7
ly hearing	(4)		1		
(3) Deaf (4) Partially hearing	(3)	4	1	4	4
(1) Blind (2) Partlally sighted	(2)	1	1		
(1) Blind (2) Partla	(1)			-	=
During the calendar year ended 31st December, 1967		A. No. of handicapped children newly assessed	cational facilities	B. No. of children newly placed in special schools (i) Of those shown at A above	Totals

CHILDREN FOUND UNSUITABLE FOR EDUCATION AT SCHOOL

During the year under review, three children were the subject of new decisions recorded under Section 57 of the Education Act, 1944.

TABLE VIII.

Handicapped Pupils awaiting places or receiving Education in Special Schools on January 18th, 1968

			1		_ ()						
	(1) Blind (2) Partia	(1) Blind (2) Partially sighted	(3) Deaf (4) Partia	(3) Deaf (4) Partially hearing	(5) Physical capped (6) Delicate	(5) Physically handi- capped (6) Delicate	(7) Maladjusted (8) E.S.N.	justed	(9) Epileptic (10) Speech Defects	otic h Defects	Total
	(1)	(2)	(3)	(4)	(5)	(9)	(7)	(8)	(6)	(10)	(11)
A. Waiting prior to 1st January 1967											
(a) Whose parents had	[1	[1		v		m	1		4 Day
their admission (b) Others			11		e	-		6			_ Res. 13 Day
:	1		ļ	1		1	-	1			
Newly assessed since 1st January, 1967 (c) Whose parents had refused consent to		-		1	ļ						— Day
their admission	1		1	-	18	"	ļ	١٩	1]	
(<i>a</i>) Others	1 1				,	v) 		×			1 Res
*This figure includes 4						•					
(e) Totals	1				12	v>-	-	20			37 Day
	1	1	1			•	4				
			13	ļ	42	27	1	92	l		158 Day
hospitals and special classes or units) *One child is included here who attends an Independent school.	personal.	-		J	2	\$	m	12	1	!	*24 Res.
C. No. of handicapped											
pupils receiving home tuition					1	7	1	!			2





